Exploring Nursing Students' Knowledge and Attitudes Towards Academic Integrity: Student Perceptions of Faculty Support

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ABSTRACT

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Maintaining high levels of academic integrity in nursing programs is critical to student success and the transition to professional practice. Integrity encompasses the values of trustworthiness and honesty. Nursing faculty need to determine if they are providing students with the resources and communication needed to maintain a culture of integrity. It is important for faculty to determine if students tend to rationalize or neutralize the psychological effects of dishonest behaviors. Finally, it is important to determine methods to eliminate violations of academic integrity in nursing education.

The overall design of the dissertation provides three distinct articles designed to stand alone as potential articles for publication. This dissertation is a part of a larger collaborative effort with two other Teachers College Doctoral students. The methods and procedures are the same for all principal investigators. Chapters I through III and Chapter V are all uniquely my own. Chapter IV represents the collaborative effort presented in this dissertation.

In a cross-sectional, quantitative study design, McCabe's Academic Integrity Survey-Modified for Nursing Students (MAIS-MNS), a Knowledge Assessment of Academic Integrity, and a Demographics Questionnaire were completed by 442 pre-licensure nursing students. In the individual portion of this study, the relationships between perceived faculty support of academic integrity policies; perceived faculty response to cheating; neutralization; and age are examined to

determine if relationships exist between the variables. Additionally, in the collaborative chapter, the variables of severity and perceived faculty support of academic integrity policies were compared to the willingness to report peer violations and program-wide strategies to improve a culture of integrity. Data were analyzed using IBM SPSS Statistics version 27 (IBM Inc., Armonk, NY, USA).

Results indicated students who have higher perceived faculty support of academic integrity policies are less likely to rationalize academically dishonest behaviors. It was also found that younger students were more likely to rationalize dishonest behaviors. It is also important to consider from which source students are receiving academic integrity information. Course syllabi, first-year orientation, program counselors, faculty, deans and other administrators, and other students were all found to be significant predictors related to student perception of faculty support of academic integrity policies. Students who have higher perceptions of severity scores and higher perceptions of faculty support of academic integrity policies scores were found to be more willing to report peers. Additionally, having program-wide interventions, such as an honor code, could help strengthen the overall culture of integrity.

Frequent communication and consistent academic integrity policies are vital for faculty to maintain throughout nursing programs Faculty should remain vigilant to changing trends in how students violate academic integrity violations and provide consistent messages.

Table of Contents

List of Tables and Figures

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K.B.F.

DEDICATION

This is dedicated to my husband, children, and family. I did it!!!

Chapter I

Introduction to the Dissertation

Academic integrity has been identified as an issue in undergraduate studies with over 70% of students admitting to engaging in some form of dishonest behavior (The Center for Academic Integrity, 1999). This issue is not limited to undergraduate, non-nursing students, it is also prevalent in pre-licensure nursing. McCabe (2009) identified that 58% of pre-licensure nursing students had engaged in at least one incident violating academic integrity standards. Nursing students should be held to high integrity standards and embody a positive image of the profession (McCrink, 2010; National Student Nurse Association [NSNA], 2015). The American Nurses Association (ANA) Code for Nurses (2015) states, "The nurse owes the same duties to self as to others, including the responsibility to preserve integrity, to maintain competence, and to continue personal and professional growth" (p. 19). Undergraduate nursing education provides the foundation of knowledge, skills, and integrity to future registered nurses. Students master theoretical concepts and practice numerous skills while learning to be competent nurses. While these two areas are integral to a nurse's success, integrity should also be established. Integrity encompasses values of honesty and trustworthiness. Values of integrity are observed through honesty in the classroom, clinical, and laboratory settings. In the classroom, integrity is maintained by not engaging in dishonest behaviors such as cheating, plagiarism, and unauthorized collaboration on assignments (Tippit et al., 2009). In the clinical setting, integrity can be maintained through accurately performing assessments and documenting accurate findings. In the laboratory setting, integrity can be maintained through not sharing information with peers regarding what to expect during return demonstrations. While students are ultimately responsible for personal integrity, faculty also serve an essential role.

Faculty promote integrity in the classroom, clinical, and laboratory settings. This promotion occurs through consistent communication of the institution's academic integrity policies. Communication throughout each course, between faculty and students, demonstrates consistency and upholding values set forth by the institution. Consistent communication also allows faculty to serve as role models to students. This role modeling demonstrates the high level of trustworthiness expected in the nursing profession (Löfström et al., 2015). While high levels of integrity are expected in nursing education, there is little research examining students' perceptions of faculty support for maintaining integrity in the classroom and clinical setting. Dishonest behaviors can compromise patient safety and overall well-being. Examples of dishonest behaviors can include cheating on class assignments or tests, sharing information with peers regarding laboratory classes, or even falsifying patient data in the electronic medical record (EMR) or care plan assignments. Falsification of data in the EMR can jeopardize patient safety and if not addressed, may go undetected and carry forward to clinical practice (Devine & Chin, 2018). Faculty should determine ways to eliminate the incidence of students falsifying information in the EMR and when this is addressed the student can establish the foundation for personal and professional growth in the nursing profession.

Background

There is evidence that nursing students engage in behaviors violating integrity in the classroom and laboratory settings (Arhin, 2009; Arhin & Jones, 2009; Bultas, Schmuke, Davis, & Palmer, 2017; Hilbert, 1985; & McClung & Schneider, 2018). Currently, there is a lack of instruments that examine student perception of faculty support related to academic integrity in the classroom and clinical or laboratory settings.

Modified versions of McCabe's Academic Integrity Survey have been utilized in nursing education (Hart & Morgan, 2010; Morgan & Hart, 2013). Permission was received from David Rettinger, President of the International Center for Academic Integrity, to modify McCabe's Original Academic Integrity Survey (Appendix D). McCabe's Academic Integrity Survey – Modified for Nursing Students (MAIS-MNS) was used to assess nursing students' knowledge and attitudes of academic integrity. The original McCabe instrument examined student engagement in behaviors considered academically dishonest, academic integrity policies, how students obtain information regarding these policies, the seriousness of certain behaviors, and if they had witnessed a peer engage in dishonest behaviors along with reporting such incidents (Devine & Chin, 2018; Hart & Morgan, 2010). A new modified version of this instrument, McCabe's Academic Integrity Survey – Modified for Nursing Students (MAIS - MNS) allowed for examination of perceptions of occurrence of academic integrity violations, knowledge, severity, and willingness to report such violations, and faculty support of academic integrity. To assess student knowledge of academic integrity, a 21-item knowledge assessment was developed and was included at the end of the MAIS-MNS.

Faculty can help students identify academic integrity policies but should also consistently enforce these policies in the classroom. Enforcement can be through exam design, proctoring, utilizing software to detect plagiarism, and vigilance in the clinical setting. By doing this, faculty serve as gatekeepers of the profession while preparing nursing students for practice (Löfström et al., 2015). However, there is little evidence of student perceptions of faculty support for academic integrity. Support can be provided by faculty through discussion of academic integrity policies and implementing means to reduce academic integrity violations. The study presented in

this dissertation explored how students perceive faculty support of academic integrity policies and how the information is presented and enforced by faculty.

Students were asked to identify areas where faculty provide support related to academic integrity in their nursing program, which could include proctoring, enforcement of academic integrity policies, exam design, and vigilance in the clinical setting with documentation or clinical paperwork. With a greater understanding of why baccalaureate nursing students engage in dishonesty behaviors, nursing faculty can determine effective educational interventions and policies to reduce breaches of academic integrity. Instilling these values into undergraduate curricula builds competent nurses who can recognize problems that compromise patient safety. An example of a patient safety issue includes breaking a sterile field during urinary catheter insertion (McClung & Schneider, 2018). The student should be able to recognize that there was a break and take appropriate action, which includes finding a new kit versus continuing to use the compromised kit and placing the patient at higher risk for infection. Students should recognize that dishonest actions in school have personal consequences, but dishonest actions have consequences in patient care as well. When recognized, a higher level of integrity is maintained (Bultas, Schumake, Davis, & Palmer, 2017). The value of integrity, when established in nursing school, is more likely to carry forward to professional practice.

Organization of Dissertation

This dissertation is a three-article dissertation, with the addition of Chapter I, Introduction, and Chapter V, Conclusion. Chapters II and III are uniquely my own research and present individual work. Chapter II synthesizes relevant literature related to academic integrity and student perceptions of faculty support. This includes identified aspects faculty contribute to a culture of integrity. With the three-article format, the reader may find overlap amongst the

chapters. This overlap will be evident specifically in the methodology and limitations of Chapters III and IV. Chapter III focuses on the specific aims addressed below examining student perceptions of faculty support related to academic integrity. Also, in Chapter III, demographics are examined with perceptions of faculty support and the tendency to neutralize academically dishonest behaviors and the effectiveness of various sources students receive information related to academic integrity. Finally, Chapter IV was written as a collaborative article examining the relationship between the variables of faculty support and severity related to reporting peer violations of academic integrity. Chapter IV was a collaborative effort between myself, Shannon Stevenson, and Amanda Willey and is presented in all three dissertations.

Chapter III Aim and Research Questions

Assess students' perceptions of academic integrity support provided by faculty members**.**

1. In pre-licensure, baccalaureate nursing students, is there a relationship of student's current year in the nursing program or student's age to perceived faculty support of academic integrity policies and to students' perceptions of the faculty response to cheating as measured by the MAIS-MNS?
2. How well do the following variables predict neutralization scores: age, year in the program, perceived faculty support of academic integrity policies, and perceived faculty response to cheating? Does the set of 10 source effectiveness variables significantly add to the prediction of neutralization over and above the other set of variables?
3. In pre-licensure, baccalaureate nursing students, is there a relationship between knowledge of academic integrity and perceived faculty support of academic integrity policies as measured by the MAIS-MNS?

4. In pre-licensure, baccalaureate nursing students, what is the relationship of perceived source effectiveness to perceived faculty support of academic integrity policies as measured by the MAIS-MNS?

Chapter IV Aim and Research Questions

Assess nursing student perspectives related to the culture of academic integrity.

1. Among pre-licensure, baccalaureate nursing students, are student perceptions of severity of violations, perceptions of faculty support, and support for program improvement strategies positively related to willingness to report peer violations as measured by the MAIS-MNS?
2. Controlling for the other variables, which variables are the best predictors of the willingness to report peer violations of academic integrity?

Changes Made Since Proposal

Since the proposal hearing, several changes have occurred. Originally, a collaborative pre-test/post-test experimental design was planned to be conducted at three different campuses, using an e-Learning program. The e-Learning program was designed to expose pre-licensure baccalaureate nursing students to topics including what constitutes academic integrity and violations of academic integrity in the classroom, laboratory, and clinical settings. The e-Learning program was set up on a Teachers College Columbia University Canvas page. Each collaborator had a unique variable that was included in the e-Learning program. This study was approved by Teachers College Columbia University (TC) Institutional Review Board (IRB), Arkansas State University, University of Texas Branch – Galveston, and Salisbury University. Following a seven-member expert review, the pre-test was distributed to nursing students at each university. The potential sample size exceeded 400 nursing students between the three

universities. However, only the pre-test had 43 total participants between the control and intervention groups. The post-test had 16 total responses between the control and intervention groups. Students who self-selected to be entered into the drawing for a gift card were each awarded a $25 Amazon gift card for completion of the post-test.

At the time of development, the e-Learning program was considered a novel virtual experience. However, due to the global pandemic and the shift to virtual learning, by the time of implementation in Fall 2021, many of the students had already experienced virtual learning. With the shift, the virtual implementation was no longer considered novel and the students may have felt overwhelmed with a majority of their course work being presented virtually. The collaborative team met with the dissertation advisors following the low post-test response rate, and it was decided to move forward and change the dissertation design from a pre-test/post-test experimental design to a cross-sectional correlational study. The original research questions were modified to reflect the study design change and the interactive e-Learning program was no longer included. The collaborative team decided to include the MAIS-MNS and knowledge assessment together in one Qualtrics survey link. With the new changes to the study design, a new IRB approval was sought and granted by TC based on the new design. For survey distribution, the collaborative team reached out to Diane Mancino, President of the National Student Nurse Association (NSNA). The survey was distributed to undergraduate nursing students who were also members of the NSNA. To encourage participation, a $10 Amazon gift card was offered to participants. Upon distribution, the number of participants quickly surpassed 440 participants and the survey was closed on the initial day of distribution. The closure was directly related to funds available for gift card distribution. There were over 1000 participants who had at least begun the survey.

Dissemination

To disseminate the information found in the articles included, it is planned to submit each chapter to a nursing journal within one year. Possible journals may include the *Journal of Nursing Education, Nursing Education Perspectives, and Nursing Education Today.* Chapter IV, the collaborative article, will be the first to be submitted for publication. It is anticipated that Chapter III will be submitted for publication following the collaborative article.

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Chapter II

Nursing Students' Perceptions of Faculty Support of Academic Integrity: A Synthesis of the Literature

In nursing, integrity encompasses values of honesty, trustworthiness, and strong ethical standards. These values should be instilled in undergraduate work and carry forth to professional practice. Merriam-Webster's Dictionary (2019) defines integrity as "a firm adherence to a code of especially moral or artistic values." In nursing, trustworthiness begins in the classroom and should remain throughout clinical practice. This value of trustworthiness is observed by the American people. The American public has identified nursing as one of the most trusted professions over the last 17 years, and this integrity begins in nursing school (American Hospital Association [AHA], 2018; Gallup 2018). Faculty can then model trust for students in undergraduate nursing programs. In turn, trust is exemplified by the students throughout the program. Faculty in nursing education play a key role in helping students to understand concepts of integrity while fostering a culture of trust and honesty in both the classroom and clinical setting. Frequent communication can reinforce the academic integrity expectations of nursing students.

Faculty should clearly explain the institution's academic integrity policies and therefore the academic integrity expectations for classroom and clinical settings to their students. These policies can be related to course papers, assignments, testing, and plagiarism. Plagiarism is the deliberate use of another's thoughts and words and presenting them as the writer's own words and thoughts. This is considered a form of stealing. Faculty should be aware of the ramifications of violating the institution's academic integrity policies and consistently investigate infractions

in a consistent manner. Through this enforcement, faculty serve as role models for the students demonstrating the importance of academic integrity in the classroom and clinical settings. In the classroom, faculty can serve as role models by remaining vigilant during testing and ensuring that academic integrity is maintained. Finally, in the clinical setting, faculty can remain vigilant ensuring students are safely performing skills and documenting assessments appropriately. These skills may transfer to clinical practice upon graduation. The purpose of this article is to review the findings of current literature that focuses on academic integrity in pre-licensure nursing programs and the students' perceptions of faculty support.

Search Methodologies

Four databases (CINAHL, Scopus, ProQuest, and ERIC) were used in the search for articles. Keywords included: *academic integrity, nursing students, nur*, ethic*, honest*, and faculty*. Searches began with either *nur** or *academic integrity* and were narrowed with the addition of the other terms. Truncated terms were chosen to broaden the search and be more inclusive of words that could be derived from that stem. Initial searches produced thousands of results, and with the addition of keywords, the searches produced more manageable results. Searches were limited to journal articles, peer-reviewed articles, and empirical articles. Country of origin was not taken into consideration; however, the English language was set as a search limitation.

Overall database searches produced 179 articles, nine of which were within the last 5 years. There were 40 duplicate articles identified and removed. After screening out articles that were editorials, issue briefs, informational articles, literature reviews, or concept analyses, 30 full-text, quantitative or mixed-methods articles were eligible for further review. There were also five qualitative articles included in the review.

Results

The findings from the literature search are included in Tables 2.1, 2.2, and 2.3. There were 35 articles included in this review describing academic integrity in undergraduate programs and examining student perceptions. One experimental, four quasi-experimental, four descriptive, six mixed methods, five qualitative, one longitudinal, and 13 correlational studies were included in this study. Ten of the studies were based in countries outside of the United States, which included Australia, Canada, Italy, Norway, South Korea, and Turkey. Nursing degree programs were a focus in 76% of the articles, with the remaining in health studies programs or other degree programs. Of the nursing degree programs identified, 11 were pre-licensure programs with no degree program identified, six were baccalaureate programs, one was an associate degree program, five included faculty as subjects, and six identified a theoretical framework. Concepts measured included academic dishonesty, academic integrity, predictors of cheating, faculty support of academic integrity, and faculty enforcement of academic integrity policies. Student perceptions of faculty support were identified in 20 of the articles. See the PRISMA diagram (Figure 2.1).

Findings of the Studies

The review revealed numerous articles examining academic integrity in relationship to undergraduate nursing, pre-licensure programs, or other unrelated undergraduate programs.

Theoretical Frameworks

As stated above, six studies incorporated theoretical frameworks. The frameworks included Gallant and Drinan's four-stage model for institutionalization of academic integrity (Hart & Morgan, 2014), Bandura's Social Learning Theory (Krueger, 2014), Social Capital Theory (Woith et al., 2012), and Theory of Neutralization (McClung & Schneider, 2018a;

McCrink, 2010; Topalli, 2005). While there is not a specific theory related to academic integrity, Sykes and Matza's (1957) theory of neutralization is useful in helping to understand why some students participate in behaviors that are considered dishonest. It examines five different behaviors, (1) denial of responsibility, (2) denial of injury, (3) denial of the victim, (4) condemnation of the condemner, and (5) appeal to higher loyalties (Sykes & Matza, 1957). The premise of Sykes and Matza's (1957) Theory of Neutralization is an individual might diminish feelings of guilt concerning engaging in behaviors considered dishonest in the classroom and laboratory setting. This theory was utilized in three studies noting those who engage in such behaviors are neutralizing their actions through justification to reduce personal guilt in the context of the situation (McClung & Schneider, 2018; McCrink, 2010; Topalli, 2005). Neutralization may occur with students who engage in dishonest behaviors because other classmates have engaged in the behaviors and have not been caught. Additionally, students may engage in cheating behaviors to demonstrate personal success to their families. Students may be first-generation scholars and strive for parental adulation or desire to demonstrate their ability to be successful in a program when families have other visions for the student's career path.

Faculty Involvement

To help achieve a higher level of understanding, faculty can integrate conversations about academic integrity conversations during program orientations; stress integrity during the distribution of the student handbook; have students sign a statement indicating the student handbook has been reviewed and reviewing pertinent school policies on the first day of a course. Effective, consistent, and frequent communication on the subject allows for a clear understanding between faculty and students about the expectations of the course and expectations related to integrity. However, taking time to provide the needed information may be

complicated with saturated curricula, assignments, and other course requirements. Tippitt et al. (2009) suggested faculty can be involved by providing clear expectations to students. Clear expectations may include encouraging students to attend all classes, laboratories, and clinical rotations. Furthermore, faculty should arrive on time, fulfill expectations for all written assignments (e.g. papers and clinical reports), and provide realistic deadlines. Through these actions, faculty serve as role models for students by upholding the same values for both themselves and the students (Löfström et al., 2015). When faculty model these actions, students can see that the faculty are supporting academic integrity policies and providing the necessary support for student success. These interactions and expectations can help students understand the importance of academic integrity, classroom expectations, and clinical expectations.

In a mixed-methods study, Robinson and Glanzer (2017) found that students do not always perceive teachers as strong supporters of academic integrity. Robinson and Glanzer (2017) discovered through student interviews the academic integrity policy language was considered vague and confusing. Another student reported the use of punishment-based warnings to the class regarding instances of cheating, which potentially served as a warning to other students to dissuade them from future engagement in academic integrity violations. Another student described a situation where faculty brought forth an instance of cheating in the class, letting the class know that faculty were aware of the incident. In this instance, students were made aware that suspension was a possibility if one was caught cheating. Robinson and Glanzer (2017) noted there was a strong focus on the negative aspects of cheating in the classroom over the positive attributes that faculty may provide to create a culture of integrity.

Faculty Role

In a qualitative study examining faculty understanding of processes related to academic integrity, Löfström et al. (2015) found several key aspects related to the role of faculty and

academic integrity. The sample included 56 faculty members who identified that faculty were responsible for teaching the rules of academic integrity related to the institution's policies in the classroom. It was also identified that faculty should uphold the values and morality of integrity through their actions and create a supportive environment exemplifying integrity. Through this, faculty serve as role models and as a moderator and enforcer of policies for students, responding to situations in a robust but impartial way. Faculty should strive to be considered an approachable figure by students and should acknowledge any misconduct suspicions and address it through feedback creating a learning experience for the student. At the same time, the sample of faculty believed that students must take personal accountability for their actions (Löfström et al., 2015). While faculty can teach students about academic integrity, it is ultimately up to the students on how they respond and if they will uphold academic integrity values.

Morgan and Hart (2013) conducted an experimental study, post-test only design, with online students enrolled in a Registered Nurse-Bachelor of Science in Nursing (RN-BSN) program. The post-test-only design used in this study allowed for a reduction in the internal validity threat of testing since using a pre-test methodology can sensitize the subject to the issue of concern in the study. This study also used random assignment, reducing the risk of self-selection, and increasing the assumption the treatment is the cause for the outcome (Shadish et al., 2002). Students in the control group reviewed the syllabus with faculty, while the experimental group received a faculty-led course focused on academic integrity. No significant difference was found between the control and experimental group with self-reported cheating. The experimental group did report higher perceptions of support from peers and faculty with academic integrity issues; this finding was significantly different than the control group. These

findings suggest that faculty involvement is important in increasing the perceptions of support related to academic integrity violations.

McCabe (1993) conducted a research study examining both students and faculty and the willingness of the two parties to share responsibilities when cheating instances were reported. This study was conducted in schools with and without honor codes. At institutions with honor codes, it was found both students and faculty had stronger reactions in general to breeches of integrity, and it was concluded that an open culture between administrators, faculty, and students at the institution was ideal to promote academic integrity. Meanwhile, at institutions without honor codes, more blame was placed on the other party (faculty or students) as to why cheating occurs. When enforcing policies, faculty believed that students should fail the assignment or even the course as a consequence. Interestingly, students found that a verbal warning was more of an appropriate reaction compared to the more severe penalty of a grade reduction or failure.

McCabe et al. (2001) noted that it was crucial for faculty to communicate expectations, policies, conduct, and encouragement to abide by these rules. Encouragement can be established by having open communication between faculty and students. While it is important to have academic integrity information in the syllabus, it should also be discussed throughout the year and not at just the beginning of a course or semester (Azulay Chertok et al., 2014). Without open dialogue between faculty and students, dishonest behaviors may continue in the classroom and continue in clinical rotations and ultimately clinical practice (Devine & Chin, 2018). Clear communication of what is considered an academic integrity violation by faculty may reduce student engagement in academically dishonest behaviors. (Hart & Morgan, 2010; McClung & Schneider, 2018; Oran et al., 2016; Thakkar & Weisfeld-Spoter, 2012; Threat & Smit, 2012). Clear communication of expectations for classroom assignments and testing, laboratory, and

clinical behaviors between faculty and students sets forth the expectations of the course and program. This level of communication in the classroom and clinical setting has the potential to positively impact patient care and patient safety.

Smedley et al. (2015) and Nierenberg (2017) conducted pre-test/post-test quasi-experimental studies without a control group. Smeldey et al. (2015) surveyed students about their plagiarism knowledge before small group sessions in the library. These group sessions provided information about what constituted plagiarism and how to avoid it. Results of the post-test indicated that the information session did improve knowledge and understanding of plagiarism. Nierenberg (2017) also assessed students before a library intervention regarding citations and appraising journals as part of a required course. Students took a pre-test and post-test that assessed literacy and abilities. The post-test was administered after the completion of the paper. Results indicated that exposure to the content of library courses did impact and improve overall knowledge and literacy related to reviewing articles.

Student Perspectives

McCabe et al (2001) found that students desired clear expectations of assignments and communication of academic integrity policies. Students desire to have respect and fairness from faculty when handling issues related to academic integrity. Students indicated that providing deterrents to cheating, including providing different versions of an exam, random seating, test generating software to randomize online examinations, and more proctors would help reduce cheating in the classroom (Arhin, 2009; McCabe et al., 2001; Park et al. 2013). To create a culture of academic integrity, the identified deterrents to cheating can promote a testing environment that supports maintaining integrity within the classroom and making engagement in academically dishonest behaviors more difficult for students (Robinson & Glanzer, 2017).

Communication related to integrity and testing can occur during orientation, at the beginning of the course, before assignments are due, or before a test is scheduled.

In a mixed-methods approach, Savage and Favret (2005) found students felt that cheating was considered unethical since there was clear information provided on integrity and honesty. However, students also felt faculty demonstrated an uncaring attitude towards students (28.71%). There was a perception that faculty were more concerned about grades than individuals and their desire to learn. In the qualitative portion of this study, students described some faculty as militant, firm, and uncaring. There was the belief that faculty provided their most likable students with better grades over other students (33%). These negative factors can contribute to distrust in the faculty and perceived lower levels of support. However, if positive support and enforcement or further investigation of student concerns are present, a more positive culture can be created.

In a qualitative study, Thakkar and Weisfeld-Spolter (2012) found that some students believed faculty were communicating expectations. However, some students expressed they did not believe faculty were doing everything possible to create an environment supportive of academic integrity, rather an environment conducive to cheating, for example, reading newspapers while administering exams rather than actively proctoring. To combat this concern, faculty can provide better proctoring and testing environments by actively looking for cheating behaviors. Another way to combat the concerns about the lack of clear communication would be to discuss school policies and associated penalties for academic integrity violations. These actions demonstrate the importance of faculty taking an active role not only at the beginning of a course but throughout, especially at times when academic integrity could be compromised.

Reasons Not to Cheat

Students may choose not to engage in dishonest behaviors based on morals, learning goals, or fear of punishment. Personal expectations and moral standards may deter a student from engaging in dishonest behaviors. Students may also be driven to fully understand and relate to the learned content. Through personal convictions and morals, students can maintain a self-awareness that they gained the knowledge based on their learning versus relying on others. The fear of being caught is a concern for many students (Miller et al., 2011; Theart & Smit, 2012). More severe or consistent forms of punishment may reduce the incidence of cheating or plagiarism. However, with more severe enforcement students may perceive their freedom as a student is compromised. Therefore, punishments should be carefully considered by faculty. Examples of punishment include providing a grade reduction for the assignment or exam, assigning a failing grade in the class, or expulsion from a program. Students may be less likely to engage in dishonest behaviors if educators are seen as enforcers who provide consistent information regarding academic integrity and course expectations.

Academic Policies

Academic integrity policies are important to include in nursing programs. Policies can be found in institutional honor codes, course syllabi, campus policies, and student handbooks (Hart & Morgan, 2010; McCabe & Trevino, 1993; McCabe, et al., 1999; Morgan & Hart, 2013). However, these policies need to be communicated with both faculty and students, to ensure understanding. Educators should serve as role models and are responsible for ensuring nursing students maintain a high level of integrity and ethics (McClung & Schneider, 2018; Woith et al., 2012). Educators should not be afraid to check assignments for plagiarism and respond appropriately (Wilkinson, 2009). Faculty can use plagiarism detection software for written

assignments to detect this type of violation. This action helps educators serve as gatekeepers and enables educators to enforce academic integrity policies. Educators and administrators should share in the presentation of information to the students. However, faculty must also be committed to enforcing the policies when students engage in dishonest behaviors, including plagiarism (McCabe & Trevino, 1993). Faculty should remain vigilant and consistent in the course, and throughout the entire nursing program, to address academic integrity violations.

Age and Year in the Program

The year a student was in the nursing program was also identified as a determining factor for tolerance of dishonest behaviors or engaging in these behaviors. Those further in the program had less tolerance than those earlier in a nursing program towards dishonest behaviors (Bultas et al., 2017). Three studies identified students who are further in a nursing program are more likely to engage in dishonest behaviors (Bultas et al., 2017; Keçeci et al., 2011; McCabe, 2009). This is in contrast to Oran et al. (2016) who did not find a significant relationship between progression in a nursing program and the likelihood to participate in dishonest behaviors. Birks et al. (2018) also found that students more advanced in their program are more likely to be engaged in these behaviors.

Discussion

Academic integrity encompasses values of honesty and trustworthiness in the classroom setting. These values are instilled in undergraduate nursing programs and carry forward to professional practice after school. Faculty play a critical role in reducing violations through open communication and dialogue with students regarding expectations, policies, and enforcement of the policies. Key themes that emerged in the literature include faculty involvement, the role of faculty, student perceptions, reasons not to cheat, and academic policies. Findings indicated that

student engagement in dishonest behaviors is a significant issue in nursing programs and communication is critical to fewer incidences of academic integrity violations.

Integrity is compromised when students engage in dishonest behaviors including cheating on tests, sharing copies of materials with friends or classmates, obtaining a copy of a quiz or exam, or engaging in plagiarism (Arhin, 2009; Arhin & Jones, 2009; Azulay Chertok, et al., 2014; Bailey, 2001; Balik et al., 2010; Bultas, et al., 2017; Hilbert, 1985; Keçeci, et al., 2011; Krueger, 2014; McCabe, 2009). Students must be held to high standards by faculty and administrators, ensuring integrity is maintained throughout a program. The drive and desire for high grades, higher grade point averages (GPA), and academic achievements have contributed to a culture of dishonesty. In the classroom, students may also witness others cheating and may view such behaviors as normal and part of the culture. Faculty should remain vigilant and consistent in their response to violations of academic integrity. If faculty do not provide corrective measures to stop these infractions, academic integrity violations may be seen as socially acceptable (Jurdi et al., 2012). The tendency to not correct infractions contributes to a growing dishonest culture versus building a culture of integrity.

Many studies were correlational designs, examining the relationships between students engaging behaviors that may compromise academic integrity and their perceptions related to academic integrity, as well as faculty support. Students were able to recognize dishonest behaviors when presented with different scenarios (Arhin, 2009; Ahrin & Jones, 2009; Woith et al., 2012). Dishonest behaviors students could identify included lack of preparation for an assignment, using a peer's work, and cheating behaviors during testing. Park et al. (2013) identified 76.8% of their sample had engaged in at least one form of dishonest behavior. Hilbert (1985) found 59% of students had been involved in some form of dishonest behaviors with 27%

admitting to plagiarism. Of the numerous types of dishonest behaviors, plagiarism was considered the most severe form (Birks et al., 2018; Hilbert, 1985; Krueger, 2014; Park et al., 2013).

These findings suggest there is a perceived connection between student awareness of academic integrity policies and acts of dishonesty but there is room for further exploration of and determine the best ways to reduce incidence rates. Evidence is conflicting if age and year in the program, this could be related to a cohort effect with one-time sampling. A gap exists between placement and progression in a program has a significant impact on the likelihood to engage in dishonest behaviors.

Descriptive studies provided a rich background regarding academic integrity but suggest topics in need of more exploration. Bailey (2001) found that cheating and plagiarism were major causes of concern for nursing faculty and there is a need for students to better understand the concept. Theart and Smit (2012) identified that plagiarism was one of the most common types of cheating. Keçeci et al. (2011) and Sohr-Preston and Boswell (2015) noted males were more likely to engage in dishonest behaviors than females. Sohr-Preston and Boswell (2015) also found that students with more academic entitlement were moderately correlated with the engagement of academic integrity. The likelihood of a specific gender participating in academically dishonest behaviors should be explored further as well as if other demographic variables play a role in student knowledge or perceived support.

There was one longitudinal study reviewed. Nursing students were surveyed at the beginning of the nursing program and then again in the second year of the program. The survey was two-fold, examining student self-reported behaviors related to cheating and those behaviors of peers. This survey was administered at two different times examining the stability of

behaviors over time in a nursing program. Between the two encounters, there were not significant changes in student engagement in dishonest behaviors (Macale et al., 2017).

All studies used convenience samples. The use of this sampling method is common and easy to obtain, however, the participants that responded may not be typical of the entire population, which reduces the generalizability to other nursing students (Polit & Beck, 2011). Some of the correlational and descriptive studies included in this review utilized surveys but yielded a low response rate. Many of the low response rates were due to small convenience samples or possible concerns of anonymity related to the sensitive nature of the topic. With these factors, there is a potential concern for the generalizability of the results to nursing students across the nation.

The article search yielded only five articles that were categorized as experimental or quasi-experimental. Morgan and Hart (2013) did encounter an attrition issue during their experiment. Initially, there were 169 students in the control group and 177 in the experimental group. When post-test data were collected, 47 students in the control group and 62 in the experimental group completed the instrument, creating a response rate of 28% and 35% respectively. This study also exhibited a heterogeneous sample which is a threat to statistical conclusion validity. Azulay Chertok et al. (2014) examined academic integrity in online health science students, but only 27% of the sample represented nursing. The findings, while significant to the study, may not be generalizable to other nursing students. There is also the threat of reactivity to the experimental situation. There was only a short period between the pre-test and post-test. In addition, Smedley et al. (2015) and Nierenberg (2017) conducted an experimental study, however, a control group was not included. While both of these articles demonstrate an

improvement of knowledge between the pre-test and post-test, the lack of a control group does not allow for an accurate determination if the intervention was successful without comparison.

There was not a consistent use of instruments to measure perspectives, attitudes, or engagement in dishonest behaviors. Two instruments were used in multiple studies. Keçeci et al. (2011) and Oran et al., (2016) both utilized the Academic Dishonesty Tendency Scale. Oran et al. (2016) reported a Cronbach's alpha of 0.84 in this study and Keçeci et al. (2011) reported a Cronbach's alpha to be between .71 - .82. The other instrument was McCabe's Academic Integrity Survey was used by Hart and Morgan (2010) and Morgan and Hart (2013). Cronbach's alpha was not reported in either study.

Gaps in the Literature

More research needs to be conducted to determine the role faculty play and the needed faculty support in reducing dishonest behaviors from occurring. Current studies examine perceptions, but few were experimental or quasi-experimental designs, which is a weakness. More research can help ensure that nursing students maintain high ethical standards in a program and carry those standards to clinical practice. The studies also indicated students were able to identify dishonest behaviors and still reported engaging in them. This finding indicates the need for more support and consistency from faculty to deter students from engaging in academically dishonest behaviors.

The Theory of Neutralization has been identified as a theoretical framework that is reflective of students rationalizing dishonest behaviors. However, current research does not fully explore concepts related to neutralizing behaviors and perceptions of faculty support. In undergraduate nursing, if expectations as consequences related to dishonest actions are clearly defined, students may be less likely to engage in dishonest behaviors and neutralize the

behaviors. Faculty may believe they are doing enough to combat the issues surrounding academic integrity, yet the question that arises is do students believe faculty are providing the necessary resources and support in the classroom and the laboratory settings? Ultimately, the goal is to eliminate instances of dishonest behaviors in nursing education. Critically, faculty need to identify sources and behaviors that students see positively support academic integrity in nursing education.

Implications of Findings

Faculty should remain involved in the classroom and clinical settings to maintain a high level of academic integrity. This includes faculty understanding the institution's academic integrity policies and more importantly regular and active communication with students regarding academic integrity expectations. Expectations should include information related to written assignments, testing expectations, as well as the consequences if academic integrity is breached. Through these actions and open communication, faculty also can serve as role models for students enhancing ethical behaviors both inside and outside of the classroom. The role of the educator should also be consistent from occurrence to the occurrence as well as consistent between educators.

Creating a trusting environment is also critical to deterring students from cheating. Trust should be maintained between students and faculty. This is established through consistency in presentation and discussion of policies and expectations as well as response to violations. A trusting environment is important to achieve high levels of academic integrity. If a student does not feel this is being supported, more violations of integrity might occur.

Limitations of The Literature Search

The literature search yielded numerous studies examining student perceptions of engagement in dishonest behaviors. However, few articles focus on student perceptions of faculty support. The literature search was limited by few articles published in the last five years and with 26 published greater than five years ago. This indicates that a limited number of research studies have been completed and published recently. The search was also limited to four database searches. The use of more databases potentially could have yielded more results.

Conclusion

Student engagement in dishonest behavior is a concern in nursing education. Students can identify dishonest behaviors and still admit to engaging in various forms. Academic integrity will continue to be a crucial standard to achieve in nursing education. The Theory of Neutralization can be used as a theoretical framework to determine the extent students are rationalizing and neutralizing engagement in academic behaviors and the correlation to perceived faculty support. Faculty may perceive themselves as actively promoting academic integrity in the classroom and clinical setting; however, the questions arise do students perceive the same level of support? Further exploration to better understand the extent to which students believe faculty are responding to academic integrity is needed. Finally, further exploration is needed to determine the best way to provide knowledge to students regarding what constitutes academic integrity violations and how to avoid them. Educators should be vigilant and determine the optimal method to reduce violations of academic integrity. Communication and support are needed to foster a trusting environment in the classroom and clinical environments.

Chapter II References

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Figure 2.1
PRISMA Diagram

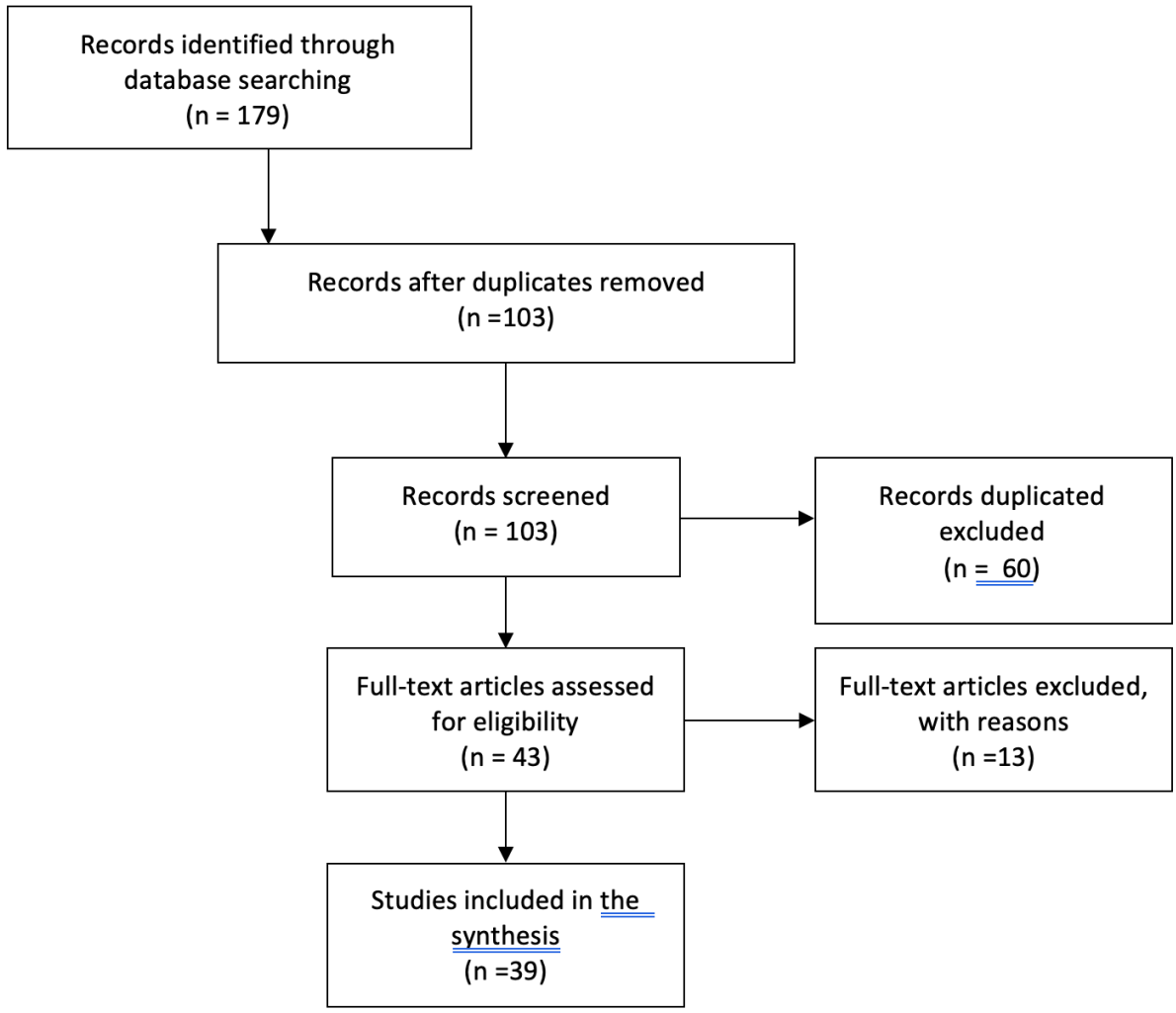

Table 2.1
Summary of the Findings: Correlational and Descriptive Designs

Citation	Sample	Findings
Arhin (2009)	44 pre-licensure nursing students	Students can identify dishonest behaviors related to exams. Difficulty identifying dishonest behaviors in-class assignments and laboratory/clinical settings.
Arhin & Jones (2009)	172 non-nursing and pre-licensure nursing students	Nursing students recognized more dishonesty behaviors than other disciplines but had more trouble recognizing dishonesty in laboratory situations.
Bailey (2001)	357 non-nursing and pre-licensure nursing students	Cheating and plagiarism identified by deans and faculty as major areas of concern. Noted that clinical behaviors and expectations should be presented to students.
Balik et al. (2010)	228 non-nursing and pre-licensure nursing students	Students with a negative attitude towards cheating were more likely to engage in dishonest behaviors. Noted tendency to accept dishonest behaviors as normal.
Birks et al. (2018)	361 pre-licensure nursing students	False documentation and discussing patients in a public setting were the most common forms of academic dishonesty. Few students are familiar with the academic policies.
Bultas et al. (2017)	329 non-nursing and pre-licensure nursing students	The further a nursing student is in a program, the less tolerant they are of dishonesty behaviors in both the clinical setting and classroom setting. Second-degree nursing students are less tolerant of dishonest behaviors than traditional nursing students.
Hart & Morgan (2010)	374 RN-BSN students	Online students were able to identify specific behaviors as more serious related to academic integrity than traditional classroom students.
Hilbert (1985)	101 Bachelors nursing students	Students had participated in some form of cheating related to the classroom. Significant relationships were noted between dishonesty in the classroom and the clinical setting.
Jurdi et al. (2012)	321 non-nursing students	Males are less likely to define an event as dishonest than females. Students tended to be more lenient towards plagiarism than other forms of dishonest behavior.

Keçeci et al. (2011)	196 pre-licensure nursing students	Males tended to engage in dishonest behaviors more than females. Third-year students are more likely to engage in dishonest behaviors than first- or second-year students.
Krueger (2014)	336 pre-licensure nursing & non-nursing students	Students engaged in courses related to academic integrity had a greater understanding of integrity than those not exposed.
Macale et al (2017)	503 Bachelors students	Longitudinal study. Dishonesty remained stable throughout the two encounters.
McCabe & Trevino (1993)	6096 non-nursing students	Self-reported participation in dishonest behaviors correlated with comprehension of policies perceived threat of being turned in/caught, and peer perceptions.
McClung & Schneider (2018b)	973 pre-licensure nursing students	There was an inverse relationship between moral reasons not to cheat and engagement in behaviors. A positive relationship was noted between students who identified punishment and engaged in cheating or dishonest behaviors.
McCrink (2010)	193 pre-licensure nursing students	Self-reported behaviors: (1) discussing clients in a public setting (2) paraphrasing without proper citations (3) obtaining test questions (4) recording client treatment/ assessments not completed (5) charting drug administration when not administered
Miller et al. (2011)	1086 graduate and undergraduate students	Students with higher perceived morals and value of learning had a higher positive perception of integrity. High perceived personal responsibility for integrity is associated with less cheating.
Oran et al. (2016)	655 pre-licensure nursing students	76.8% of students engaged in at least one form of cheating, including cheating on tests. Personal cheating behaviors were identified if perceived peer cheating was occurring.

Park et al. (2013)	118 Bachelors students	Those between 20 and 24 years of age demonstrated the most significant improvement of knowledge related to plagiarism compared to other age groups following the intervention.
Sohr-Preston & Boswell (2015)	550 pre-licensure nursing students	Males were noted more likely to cheat. Age was not significantly related to cheating The pressure of academic success was noted.
Theart, & Smit (2012)	550 pre-licensure nursing students	Cheating is identified as an issue in nursing, especially plagiarism. Perceived high levels of dishonesty in clinical situations too

Table 2.2
Summary of the Findings: Quasi-Experimental, Experimental, and Mixed-Method Designs

Citation	Sample	Findings
Azulay Chertok et al. (2014)	355 pre-licensure nursing students	Intervention related to academic integrity did show significant improvement in the intervention group than the control group.
Löfström et al. (2015)	56 faculty members	Mixed-methods approach. Key concepts include: (1) teachers of rules and values, (2) gatekeepers, (3) teaching-oriented social reformers, (4) academic role models emphasizing student responsibility, and (5) skill-builders
McCabe (2009)	1098 pre-licensure nursing students	Mixed-methods approach. Over half of the students indicated engagement in classroom cheating. Increasing technological use is a cause for concern, including online testing.
McClung & Schneider (2018a)	1694 Bachelors students & faculty members	Mixed-methods approach. Those with lower scores on the instrument were correlated to more likely to engage in dishonest behaviors.
Morgan & Hart (2013)	507 pre-licensure nursing students & teacher education students?	Increase in understanding and preventing plagiarism following interactive course. Not a significant difference between nursing and teacher education in results.
Nierenberg (2017)	499 pre-licensure nursing and non-nursing students	No statistically significant differences between scores and the year in school, and frequency of using the internet to help with homework when using the library when completing homework.

Savage & Favret (2006)	101 pre-licensure nursing students	Mixed-methods approach. Students had a positive image of faculty role modeling in the classroom, even with students who noted issues with how integrity violations were handled.
Wilkinson (2009)	100 faculty members & 254 pre-licensure nursing students	Mixed-methods approach. No significant difference was found between students and faculty regarding cheating on assignments. Plagiarism was related to a lack of understanding of rules.
Woith et al. (2012)	55 pre-licensure nursing students	Mixed-methods approach. Students identified situations considered academically dishonest or could provide specific examples that would be considered dishonest. Trustworthiness is considered to be a characteristic of an individual who exemplifies strong values of academic integrity.

Table 2.3
Summary of the Findings: Qualitative Designs

Citation	Sample	Findings
Fontana (2009)	12 faculty members	Perceived notion that faculty serve as the gatekeepers to the nursing profession while preparing students for their nursing careers. However, faculty noted that confronting students might damage the faculty/student relationship.
Robinson & Glanzer (2017)	75 non-nursing students	Students perceived faculty in two ways, (1) one who never spoke of misconduct – leading students to believe it was not a problem (2) those who used punishment-based warnings encouraging students not to engage in dishonest behaviors.
Thakkar & Weisfeld-Spolter (2012)	250 non-nursing students	Students are familiar with policies, but not always able to define cheating behaviors or repercussions if caught. Faculty were viewed as enforcers and should model ethical behaviors.
Topalli (2005)	191 non-nursing students	Focus on the use of neutralizing behaviors of those with criminal backgrounds.
Wideman (2011)	11 pre-licensure nursing students	Students reported that they engaged in cheating behaviors related specifically to the increased workload and the magnitude of work required for the program. Students also were noted to neutralize their behaviors Students perceived that some faculty were not technologically savvy or established weak barriers that students quickly discovered how to work around.

Chapter III

Examining Student Perceptions of Faculty Support Related to Academic Integrity

Academic integrity encompasses values of honesty, trustworthiness, and high moral expectations. The value of integrity is consistent across the world and disciplines (Birks et al., 2018; Krueger, 2014, McCabe & Trevino, 1997). In nursing education, trustworthiness is established throughout the academic program. This trustworthiness is foundational in both the classroom and clinical setting and should translate to professional practice. Consistently, nursing has remained as one of the most trusted professions over time, as voted on by the American public (American Hospital Association [AHA], 2018; Gallup 2018). When this trustworthiness is violated, it also violates integrity. McCabe (2009) noted there is concern that if a nursing student violates academic integrity standards during their curriculum it could impact the student's performance as a nurse and ultimately the well-being of patients. Violations of academic integrity include, but are not limited to: cheating on assignments or exams, plagiarism, unauthorized collaboration, and falsifying documentation.

Faculty serve a critical role in helping students avoid engagement in dishonest behaviors. Faculty can communicate expectations that begin to shape the characteristics of honesty and trustworthiness in nursing students (Azulay Chertok et al., 2014; Löfström et al., 2015; McCabe et al. 2001; Robinson & Glanzer, 2017, Tippitt et al., 2009). Communication should occur throughout each class and across the nursing program. When faculty convey consistency and clear expectations, students can better comprehend and maintain high standards of integrity. However, without clear faculty support, students may deviate from values of honesty and trustworthiness and engage in behaviors considered dishonest.

Understanding what drives students to engage in dishonest behaviors is also important to examine. Students may enter a nursing program with diverse backgrounds, shortly after high school, or make a career change to nursing later in life. Therefore, nursing programs have students of diverse ages. These factors can play a role in how students perceive dishonest behaviors through personal experiences. Thus, some students may neutralize their behaviors based on observing peers or rationalize why it is considered acceptable for them to engage in these behaviors. These influences could also impact the students' perceptions of the support that faculty provides. The focus of this article is to examine if students perceive that faculty are supporting academic integrity policies through communication and actions to deter engagement in dishonest behaviors. Additionally, this article will explore if age and year in the program correlate to students neutralizing academically dishonest behaviors.

Background

To better understand the role faculty play in maintaining academic integrity, as well as factors that might contribute to students engaging in dishonest behaviors, five different variables were examined. These five variables were: (1) perceived faculty support of academic integrity policies, (2) perceived faculty response to cheating, (3) neutralization, (4) age, and (5) year in the program. Each variable will be explored further in a review of the literature below.

Faculty Support and Perceptions of Faculty Support

Faculty can provide academic integrity support to nursing students throughout the academic program. One way to accomplish this is to ensure timely and consistent information regarding academic integrity is discussed with students. This communication can occur during the program orientation, at the beginning of the semester, described in the syllabus, provided in the student handbook, and throughout the program as needed (Azulay Chertok et al., 2014;

Löfström et al., 2015; McCabe et al. 2001; Robinson & Glanzer, 2017). Clear expectations allow the student to better comprehend the high expectations to which they are held (Tippitt et al., 2009). This frequent communication fosters a sense of trust and helps establish faculty as role models. As a role model, faculty can provide guidance, remain vigilant, and consistently enforce policies. Through these actions, students can see that faculty are setting students up for success both in school and in professional practice. Finally, it is important for faculty to follow up on suspicions of violations of academic integrity. When instances of academic dishonesty are suspected, it is the faculty's role to investigate the situation and make unbiased decisions based on the institution's policies (McCabe & Trevino, 1993). Faculty should maintain a consistent, fair, and unbiased response to violations of academic integrity, thus exemplifying to students that faculty are supporting the policies set forth by the institution and that all cases are treated equally.

Students need faculty to provide support of academic integrity policies in undergraduate programs. This support comes from clear communication and high values for morality and integrity. Students desire to have faculty acknowledge and address misconduct in a consistent manner amongst the student population (Löfström et al., 2015). Studies have indicated that when faculty provide information related to academic integrity violations, students demonstrate a greater understanding of how to avoid the behavior (Morgan & Hart, 2013, Nierenberg, 2017; Smedley et al., 2015). Ultimately, while it is important faculty support academic integrity, it is also important students perceive this support.

Faculty Response to Cheating

To deter cheating behaviors, faculty can implement different actions in the classroom to maintain academic integrity. Concerning exams and maintaining integrity, students have

identified that deterrents to cheating included: (1) providing different versions of an exam, (2) randomized seating during an exam, (3) randomization of exam questions on online exams, (4) and increasing the number of proctors during exams (Arhin, 2009; McCabe et al., 2001; Park et al. 2013). When utilized, these deterrents provide a testing environment that supports high levels of integrity and can make engagement in dishonest behaviors more difficult.

Students have also identified open communication between faculty and students as a crucial aspect when maintaining academic integrity. Thakkar and Weisfeld-Spolter (2012) identified students' desire to have clear communication regarding the institution's policies and procedures related to academic integrity as well as any associated penalty if caught engaging in dishonest behaviors. Possible penalties should be communicated with students. More importantly, any investigations should remain consistent between suspected violations of academic integrity. This demonstrates fairness and consistency to students. McCabe et al (2001) also noted that students have a strong desire for faculty to communicate expectations in the course with them. However, it is ultimately up to the student to uphold these values.

Neutralization

The theory of neutralization is useful in helping to understand why some students rationalize behaviors that are considered dishonest. The theory examines five different behaviors: (1) denial of responsibility, (2) denial of injury, (3) denial of the victim, (4) condemnation of the condemner, and (5) appeal to higher loyalties (Sykes & Matza, 1957). This theory encompasses the thought that if an individual engages in certain behaviors, the feeling of guilt might be diminished if the action can be rationalized. Factors that might influence engagement in dishonest behaviors in an undergraduate nursing program might include observing peers who have participated in dishonest behaviors and have not been caught. Another contributing factor

might be attempting to demonstrate success in a program to family members. This could be related to a student being a first-generation college student or to families who desire a different career path for the student. McCabe et al. (1999) found in a qualitative study that students justify cheating through pressures placed on them by family, social expectations, academic achievement and accolades, stress, lack of motivation, and perceived lack of preparation. Wideman (2011) found that students used phrases like: “it’s just the way we do it,” “it wasn’t stated on the syllabus,” “even good people do bad things,” and “they can’t kick me out because I'm paying for it,” to justify cheating behaviors (p. 34). If these issues are identified in nursing education, appropriate actions can be taken to help develop a foundation demonstrating that violations in policies will not be tolerated.

Integrity is compromised when students engage in dishonest behaviors including cheating on tests, sharing copies of materials with friends or classmates, obtaining a copy of a quiz or exam, or plagiarism (Arhin, 2009; Arhin & Jones, 2009; Azulay Chertok, Barnes, & Gilleland, 2014; Bailey, 2001; Balik, Sharon, Kelishek, & Tabak, 2010; Bultas, et al., 2017; Hilbert, 1985; Keçeci, Bulduk, Oruc, & Celik, 2011; Krueger, 2014; McCabe, 2009). Students must be held to high standards, ensuring integrity is maintained throughout a program. In academia, the drive to be academically successful and obtain high grades has been correlated to why students engage in dishonest behaviors (Sohr-Preston & Boswell, 2015). This desire for high grades, higher grade point averages (GPA), and academic achievements have contributed to a culture of dishonesty. Additionally, students may be concerned about keeping up with their peers and engage in dishonest behaviors to remain academically competitive. In the classroom, peers may witness other peers cheat and view such behaviors as normal and part of the culture. If faculty do not provide corrective measures to stop these violations, violations of academic

integrity may continue to be seen as socially acceptable (Jurdi, Hage, & Chow, 2012). The tendency to not address issues related to academic integrity contributes to a growing culture of dishonesty versus building a culture of integrity within nursing.

Age and Year in the Program

The nursing field attracts individuals of different ages to nursing programs and the profession. Some students recognize the desire to enter nursing from an early age while others may choose the profession later in life. Hart and Morgan (2010) found students who were enrolled in an RN-BSN program were less likely to engage in cheating behaviors than those who were in a traditional program. They related this finding to the possibility that a previous degree or work experience provided a positive moral and ethical foundation for these students. The researchers also found younger students reported more instances of cheating or peer assistance than older students. These findings are consistent with Bultas et al. (2017) who found that students earlier in the program were more tolerant of cheating than those more advanced in the program. Birks et al. (2018) found that students were more likely to engage in academic misconduct at a younger age than older age. The highest incidence of misconduct occurred between the ages of 20-21 with the lowest engagement above 36 years of age. Additionally, Bultas et al. (2017) identified students in an accelerated program, or second-degree program were less tolerant of dishonest behaviors than those in a traditional program. The previous experiences of these students might also be a contributing factor to the decision to not engage in dishonest behaviors leading to less tolerance of the behaviors. In contrast, McCabe (2009) noted that accelerated students were more likely to engage in dishonest behaviors than those in a traditional program. This higher level of engagement in dishonest behaviors could be attributed to a desire to succeed in a new career path.

The year the student is in the program also can affect the engagement in dishonest behaviors. Those enrolled in the early part of a nursing program may lack the education and resources needed to maintain academic integrity (Keçeci et al., 2011). In contrast to those early in the program, Keçeci et al. (2011) noted that those more advanced in a program were more likely to engage in dishonest behaviors which could be a result of peer influence. Thus, these students were potentially neutralizing their behaviors because others were also similarly reporting material. Oran et al. (2016) identified that students in the third year (2.5 ± 0.6) of the nursing program were more likely to engage in dishonest behaviors compared to the second year (2.31 ± 0.6) and fourth year (2.4 ± 0.5). Birks et al. (2018) found similar results noting that those enrolled in the third year of the program were more likely to engage in academic misconduct compared to those in the first or second year of a program. These findings are conflicting with one another which is a cause for concern and need for further evaluation. Differences could be related to the cohort that was surveyed or the use of a cross-sectional design. Both age and year in the program have been demonstrated as a potential contributing demographic to engage in academically dishonest behaviors.

In summary, faculty can provide the support needed to maintain an environment supportive of high academic integrity values, however, the question that remains is do students perceive that faculty are supportive and consistent in instilling these values? In addition, it is important to better understand driving factors that reduce the likelihood of students neutralizing dishonest behaviors.

The following definitions pertain to the variables used in this study: perceived faculty support of academic integrity policies is defined as how students perceive the faculty's discussion and enforcement of academic integrity policies. Perceived faculty response to

cheating is defined as how faculty respond to violations of academic integrity and actions taken to deter these violations. Source effectiveness is defined as student perceptions of how much information related to academic integrity policies was learned from each of ten resources. Neutralization is defined as the extent to which students rationalize dishonest behaviors. Knowledge assessment is defined as the students' knowledge of academic integrity based on a 21-item quiz. To assess student perception surrounding these variables, the research questions were:

1. In pre-licensure, baccalaureate nursing students, is there a relationship of student's current year in the nursing program or student's age to perceived faculty support of academic integrity policies and to students' perceptions of the faculty response to cheating as measured by the MAIS-MNS?
2. How well do the following variables predict neutralization scores: age, year in the program, perceived faculty support of academic integrity policies, and perceived faculty response to cheating? Does the set of 10 source effectiveness variables significantly add to the prediction of neutralization over and above the other set of variables?
3. In pre-licensure, baccalaureate nursing students, is there a relationship between knowledge of academic integrity and perceived faculty support of academic integrity policies as measured by the MAIS-MNS?
4. In pre-licensure, baccalaureate nursing students, what is the relationship of perceived source effectiveness to perceived faculty support of academic integrity policies as measured by the MAIS-MNS?

Methods

Design

This study utilized a cross-sectional, correlational design. The larger study was a result of a collaborative effort by three doctoral students investigating academic integrity in undergraduate nursing students. This article represents my individual work.

Participants

Participants were recruited through the National Student Nurse Association (NSNA). Permission was obtained from Diane Mancino, Executive Director of the NSNA, to recruit participants via the organization's email database. There are approximately 49,000 members of the NSNA. These students are enrolled in Associate Degree (AD), Bachelor of Science (BSN), diploma, and generic master's programs nationwide. Approximately 36,000 of these members are enrolled in a BSN program (National Student Nurse Association, 2021). Inclusion criteria for this study were that participants must be: (1) undergraduate BSN students and (2) over 18 years of age. Exclusion criteria included (1) those under the age of 18 years and (2) enrollment as an associate degree, diploma, or RN-BSN student.

To calculate the needed sample size, the parameters to establish a significant correlation were established as $r = 0.20$, α (two-tailed) = 0.05, and power of 0.80. Based on these criteria, a sample size of 194 would be appropriate for this study. This sample size was feasible to achieve with the number of NSNA students contacted during recruitment. As cited by the National League for Nursing (2015), 15% of nursing students identify as male, therefore the study sample was expected to reflect typical gender distribution, which is largely skewed towards females.

Instruments

Three instruments were used in the study: McCabe's Academic Integrity Survey-Modified for Nursing Students (MAIS-MNS), a Knowledge Assessment of Academic Integrity, and a Demographics Questionnaire. The MAIS-MNS instrument for this study was a modified version of McCabe's Academic Integrity Survey. McCabe's Academic Integrity Survey (Appendix D) has been used at the high school, undergraduate, and graduate levels to assess student engagement in cheating and their comprehension of academic integrity policies. The International Center for Academic Integrity (2017) reported that McCabe's survey has reached over 70,000 high school students, 71,000 undergraduate students, and 17,000 graduate students. Prior studies have utilized selected portions of McCabe's Academic Integrity Survey in their research with students (McCabe & Trevino, 1993; McCabe et al., 2001). Additionally, subscales of McCabe's Academic Integrity Survey have previously been used in studies on academic integrity in nursing students (Hart & Morgan, 2010; Krueger, 2014; Morgan & Hart, 2013). While components of McCabe's original survey were relevant to the current study, there were no nursing-specific questions and some questions that were not relevant to the study sample. Therefore, permission was received to modify the instrument as needed to meet the collaborative research team's needs (Appendix E).

The modified survey, the McCabe's Academic Integrity Survey-Modified for Nursing Students (MAIS-MNS) (Appendix F), consisted of 137 items measuring: (1) campus attitudes, (2) source effectiveness, (3) subjective knowledge, (4) neutralization, (5) perceived faculty support of academic integrity policies, (6) occurrences of academic integrity violations, (7) awareness of occurrences, (8) student perceptions of severity, (9) willingness to report peer violations, (10) perceived faculty response to cheating, and (11) suggestions for program

improvement. All items were assessed and modified, if needed, for use with undergraduate nursing students.

The knowledge assessment is a 21-item instrument used to assess student knowledge of academic integrity. The knowledge assessment immediately followed the MAIS-MNS in the survey. There were three categories: (1) defining academic integrity and severity of violations, (2) why students cheat and how to prevent it, and (3) reporting peer violations. The Content Validity Index (CVI) was calculated on the knowledge assessment before pilot testing. The principal investigators sent the knowledge assessment to 12 experts for review. Seven reviewers returned the score sheet with scoring and feedback. Reviewers were asked to determine and score each question based on the identified variable on a 1 (does not measure) to 4 (clearly measures). Questions that scored a '3' or '4' were assigned and coded with one signifying the question measured the desired variable. Questions that received a score of '1' or '2' were coded with a zero signifying that the experts did not agree that the question did not accurately measure the desired variable. Each question was then individually assessed for item-level content validity index (I-CVI). The total number of experts that agreed to each question was divided by the total number of reviewers (n = 7) to get the final score. As identified in Yusoff (2019), an acceptable CVI with six to eight reviewers is at least 0.83. Based on these guidelines, one question from each identified variable did not meet the 0.83 criteria. Each of these scored a 0.714. The principal investigators met to review all feedback from the expert reviewers and revised the three questions with a CVI of 0.714. Feedback was also considered for all questions, and minor changes, including grammar and clarity, were examined. In addition, the scale-level content validity index based on the average method (S-CVI/Ave) was calculated. This statistic represents

the “average proportion relevance judged by all experts” (Yusoff, 2019, p. 52). The S-CVI/Ave score was 0.905 for this assessment.

The Demographics Questionnaire included 11 questions assessing (1) year in the program, (2) enrolled in a traditional or accelerated program, (3) if they already hold a bachelor’s degree, (4) gender, (5) Hispanic, Latino, or Spanish origin, (6) Racial background, (7) age, (8) English as their first language, (9) estimated current GPA, (10) current living arrangements, and (11) any other professional licensures held.

To address the research questions posed in this article, six subscales were analyzed: (1) neutralization, (2) perceived faculty support of academic integrity policies, (3) perceived faculty response to cheating, (4) source effectiveness, (5) demographics, specifically year in the program and age, and (6) overall scores on the knowledge assessment.

Procedure

Pre-licensure baccalaureate nursing students were surveyed using an online survey platform on various aspects of academic integrity. With Institutional Review Board (IRB) approval from Teachers College, Columbia University, an authorized representative of the National Student Nursing Association (NSNA) sent a recruitment email with the survey link to approximately 36,000 NSNA members enrolled in pre-licensure baccalaureate programs. Upon clicking the link, all prospective participants were directed to Qualtrics to review the informed consent.

Students who chose to participate in the study by consenting were directed to the Qualtrics survey that included the MAIS-MNS. The mean survey completion time was 20.71 minutes with a median completion time of 18.28 minutes. Participants who did not complete the survey, those who took the survey in less than five minutes, or those who took over one hour to

complete the survey were excluded from this data analysis. Upon completion of the survey, participants were prompted to enter their email address if they elected to receive a $10 Amazon gift card to thank them for their participation. Due to budget constraints, recruitment was closed after the first 446 participants completed the survey, 1007 had started the program and 561 surveys were left unfinished.

Data Analysis

Data were exported from Qualtrics to Excel and reviewed for outliers and missing data. Two participants were removed as they did not consent to the study. Four participants who completed the survey in five minutes or less were also removed from the data set as the collaborative research team felt that five minutes was too brief to validly complete a survey of such length. After data were coded it was imported into IBM SPSS Statistics version 27 (IBM, Inc., Armonk, NY, USA) for analysis. To establish the reliability of the subscales discussed in this article, Cronbach's alpha was calculated for each and are as follows: Source Effectiveness (.838), Perceived Faculty Support of Academic Integrity Policies (.886), Perceived Faculty Response to Cheating (.880), and Neutralization (.912). Cronbach's alpha for the entire MAIS-MNS, excluding demographic questions, was .922.

Results

In this section, the descriptive results with respect to each instrument are presented first and then the findings with respect to each research question are described.

Demographics

Students were asked to identify their year in the program and their age. One hundred twenty-five (28.3%) identified themselves as being in the first year of the nursing program. One hundred thirty-two (29.9%) noted they were in the second year of the program. There were 185

(41.9%) who identified they were in the third year of the nursing program. Students ranged from 18-58 years old with a median age of 23 years old. Students were asked to identify their ethnicity, 271 (61.3%) were White, 66 (14.9%) Asian, 37 (8.4%) Black or African American, 22 (5%) Hispanic, Latino, or Spanish origin. The remaining 10.4% reported mixed ethnic backgrounds.

Source Effectiveness

The individual summed scores for the 10-item Source Effectiveness subscale ranged from 13-40, with a median score of 28.00, mean score of 28.06, and a standard deviation of 6.43 (see Appendix G). All 10 items were unique to the MAIS-MNS and were not included in McCabe's original Academic Integrity Survey. Students identified where and how much they learned about academic integrity policies. Overall, students identified that they "learned a lot" from first-year orientation (48.6%), the student handbook (54.1%), faculty (64.7%), and course syllabi (75.1%). Students felt they learned the least from program counselors (28.1%), residential advisors (54.8%), advisors (36.0%), and other students (27.6%).

Neutralization Subscale

The seven-item neutralization subscale was not part of McCabe's original survey and was added to the MAIS-MNS. The subscale scores ranged from 7-35, with a median score of 10, mean score of 12.4, and a standard deviation of 6.1 (Appendix G). The lower the score on this scale indicated that students were less likely to neutralize engaging in dishonest behaviors. The question stem was, "To what extent do you agree with the following statements? Cheating is okay when…". Over 87% of the students surveyed selected either "strongly disagree" or "disagree" that cheating is okay when it does not impact anyone else. Approximately 89% of the students also "strongly disagree" or "disagree" with the statement "Cheating is okay when it does

not compromise patient safety." When students were asked, "Faculty do not prepare you for an exam or assignment," 76.24% of the students selected "strongly disagree" or "disagree" Finally, 78.96% of students chose "strongly disagree" or "disagree" concerning cheating is okay when students are "not aware of the academic policies."

Perceived Faculty Support of Academic Integrity Policies Subscale

The individual summed scores for the 12-item Perceived Faculty Support of Academic Integrity Policies subscale ranged from 12-60, with a median score of 43, a mean of 42.96, and a standard deviation of 9.88 (Appendix G). Four of the items were from McCabe's original survey, two were modified, and six items were added. A higher score on the subscale indicates that students perceive that faculty support and discuss academic integrity policies with them. Over 80% of the students identified that faculty "often" or "very often" provided information about proper citations or referencing of written or internet sources. Regarding fabricating data in course labs, 45.9% of students reported that faculty "often" or "very often" discussed this topic with them, while 51.1% of students reported faculty "often" or "very often" discussed fabricating clinical data. Students also reported that faculty "often" or "very often" emphasized the importance of not discussing patient information outside of the post-clinical conference (70.3%) and not discussing patient information in common areas (71.3%). A large majority (89.1%) of students reported that faculty "often" or "very often" discussed policies related to academic integrity at the beginning of a course.

Perceived Faculty Response to Cheating Subscale

The individual summed scores for the 20-item Perceived Faculty Response to Cheating subscale ranged from 27-73, with a median score of 71, a mean of 70.70, and a standard deviation of 11.33 (Appendix G). Five of the items were from McCabe's original survey and the

remaining 15 were added to reflect classroom, laboratory, and clinical settings specific to undergraduate nursing programs. A higher score on the subscale indicates that students believe that faculty have a strong response to cheating and are taking measures to ensure cheating does not occur, thus maintaining high levels of academic integrity. Of the students surveyed, 19.9% felt that cheating was a serious problem in their nursing program. To circumvent cheating, 61.7% of students "agree" or "strongly agree" that faculty investigated suspected incidents of violation fairly and impartially. This concurs with 61.1% of students who "agree" or "strongly agree" that faculty are vigilant in discovering suspected cases. In addition, 70.2% of the students surveyed "agree" or "strongly agree" that faculty promote open communication regarding academic integrity. In addition, 78.5% of students felt that the faculty provide adequate information regarding integrity. An overwhelming majority (84.8%) of students felt faculty followed the institution's academic integrity policies.

Regarding testing, 57.9% of students "agree" or "strongly agree" that faculty change exam questions regularly. Sixty-six percent of students selected "agree" or "strongly agree" with faculty randomizing questions on computerized exams. Finally, 74.4% of students chose "agree" or "strongly agree" with the statement faculty utilize plagiarism detection software.

Knowledge Assessment

The 21-question knowledge assessment scores ranged from 5 correct answers to 21 correct answers. The mean score was 15.54 with a standard deviation of 2.81. Six questions were true/false, two were multiple responses, and there were 13 multiple-choice questions. The reliability of the knowledge assessment was established by the Kuder-Richardson-20 (KR-20) formula. The KR-20 was reported at 0.63. This score is above the acceptable reliability coefficient of 0.50 for instructor-made tests (McDonald, 2014). The point biserial index (PBI)

ranged in scores from 0.08 to 0.83, with a mean PBI of 0.40. Of the multiple response and multiple-choice questions, six questions had a PBI of 0.11 to 0.29 indicating weak and marginal questions that should be revised to identify any issues with the stem or options. Nine of the multiple-choice and multiple-response questions had a PBI of greater than 0.30 indicating questions that could easily discriminate between the upper 25% of students and the lower 25% of the students taking this assessment. The *p* values on the knowledge assessment ranged from 0.31 to 0.97, with a mean score of 0.74. See Knowledge Assessment Item Analysis, Appendix H.

Research Questions

To address the research questions, correlations between the variables were computed. Since the data were not normally distributed, Spearman's rho was chosen to analyze the data.

To address research question #1 concerning the relationship between the student's year in the program, age, perceived faculty response to cheating, and perceived faculty support of academic integrity policies, a Spearman's rho analysis was conducted. A negative weak, non-significant correlation (r_s = -.053, p > .05) was found between the student's current year in the program and the perceived faculty response to cheating. There was a weak, non-significant correlation (r_s = .008, p > .05) found between the student's current year in the program and perceived faculty support of academic integrity policies. This result indicates that the year in the program did not have a significant impact on perceived faculty response to cheating or perceived faculty support of academic integrity policies. A weak, non-significant correlation (r_s = .026, p > .05) was found between age and perceived faculty support of academic integrity policies. When examining the variable of age-related to perceived faculty response to cheating, no correlation (r_s = .011, p > .05) was found. Thus, the hypothesis that as students progressed through the nursing

program or students who were more advanced in age, that there would be heightened levels of perceived faculty responses was not supported.

Research question #3 investigated if a relationship exists between the students' knowledge of academic integrity based on the knowledge assessment score and the perceived faculty support of academic integrity policies. There was no significant correlation (r_s = -.014, p > .05) found between the students' summed score on the knowledge assessment and the students' perceived faculty support of academic integrity policies.

Research question #4 examined if a relationship between source effectiveness and perceived faculty support of academic integrity policies exists. There was a significant correlation (r_s = .265, p < .01) between perceived faculty support of academic integrity policies and the student handbook. Moderate correlations were found between the faculty response and (1) residential advisor (r_s = .342, p < .01), (2) the course syllabus (r_s = .366, p < .01); (3) first year orientation (r_s = .367, p < .01), (4) other students (r_s = .368, p < .01), (5) the campus website (r_s = .376, p < .01), (6) faculty (r_s = .393, p < .01), (7) advisor (r_s = .428, p < .01), (8) program counselor (r_s = .441, p < .01), and (9) dean or other administrator (r_s = .448 , p < .01). These positive correlations indicate that as students perceive that they are receiving academic integrity information from various sources the perception of faculty support of academic integrity policies also increases. The correlation table can be found in Appendix I.

Table 3.1 provides a matrix of the correlations among the subscales.

Regression Analysis

To examine research question #2, two multiple linear regressions were conducted. The first assessed if age, year in the program, perceived faculty support of academic integrity policies, and perceived faculty response to cheating significantly predicted neutralization (Model

1). The results of Model 1 regression were significant, $F(4,436) = 8.94$, $p < .001$, $R^2 = 0.076$, indicating that approximately 7.6% of the variance in neutralization scores is explained by age, year in the program, perceived faculty support of academic integrity policies, and perceived faculty response to cheating. When predicting neutralization, age, perceived faculty support of academic integrity policies, and perceived faculty response to cheating all had significant negative coefficients ($p < .05$) indicating that as those scores increased, the neutralization scores decreased. Table 3.2 provides a summary of the regression.

The second analysis was then conducted to determine if the source effectiveness variables significantly added to the prediction of neutralization over and above the first set of predictors (Model 2). The results of Model 2 regression were significant $F(14,426) = 2.08$, $p < .001$, $R^2 = 0.119$, indicating that approximately 12% of the variance is explained when source effectiveness variables are added to the model. Interestingly, the perceived faculty support of academic integrity policies was no longer predictive. In addition to the significant predictors of age and perceived faculty response to cheating found in model 1, the sources of faculty and the course syllabi significantly added to the model indicating that as those variables increased, neutralization decreased. All other source effectiveness variables did not significantly contribute to the analysis.

The results of Model 1 and Model 2 were then compared with one another. Model 1 reported $R^2 = 0.076$ and adjusted $R^2 = 0.067$. Model 2 reported $R^2 = 0.119$ and adjusted $R^2 = 0.090$. The results of Model 2, when variables representing source effectiveness were added significantly predicted neutralization over and above the other variables. The R^2 change between Model 1 and Model 2 was .043 and the change was significant at $p = .025$.

A linear regression analysis was performed to assess research question #4 to determine when other variables are controlled for if different sources were more effective when predicting perceived faculty support of academic integrity policies. To assess for the absence of multicollinearity, the collinearity diagnostics were reviewed. Based on the variance inflation factor (VIF) reported on the correlations table, all scores are less than 10 which indicates that there is not an issue with multicollinearity (Regorz Statistik, 2019). The collinearity table shows the variables of other students, deans/other administrators, and course syllabus with condition index values of greater than 15, indicating a possible problem with multicollinearity. However, the variance proportion values of these three variables do not have a value greater than .9 (Regorz Statistik, 2019). Therefore, no multicollinearity issues were identified between these variables. The correlations table and collinearity diagnostics table are found in Appendix J. The results of the regression were significant $F(10,431) = 22.58$, $p < .001$, $R^2 = 0.34$, indicating that approximately 34% of the variance in perceived faculty support of academic integrity policies is explained by different sources. The regression analysis summary can be found in Table 3.3. Significant predictors of perceived faculty support of academic integrity policies included the course syllabus, campus website, first-year orientation, program counselors, faculty, deans and other administrators, and other students. Non-significant predictors of perceived faculty support of academic integrity policies included the student handbook, residential advisors, and advisors.

Discussion

Overall, students do have a positive perception of the role faculty play in deterring violations of academic integrity. Neutralizing behaviors were noted to be less in those students who perceive high levels of perceived faculty support of academic integrity policies. Upon examining the neutralization variable, 78.96% of the students disagreed that cheating was okay

when they were not aware of the academic policies. The finding contrasts with Wideman (2011) who found that students justify cheating because "it wasn't stated on the syllabus" (p.34). Age was noted to be correlated to the likelihood to neutralize behaviors considered academically dishonest. This finding is supported by the finding of Birks et al. (2017) who also found that younger students were more likely, than older students, to engage in behaviors that violated academic integrity. Interestingly, a relationship was not found between the year in the program and neutralization. Typically, those who are further along in a program are older than those earlier in a program. Keçeci et al. (2011) and Oran et al. (2016) had both found that students who have progressed further in the program were more likely to engage in dishonest behaviors. Information regarding academic integrity may come from multiple sources. Students identified that they learned a lot in first-year orientation, from faculty, and the course syllabus. This finding is consistent with the findings of Azuly Chertok et al. (2014), Löfström et al (2015), McCabe et al. (2001), and Robinson & Glanzer (2017).

The results of the regressions indicated that students who perceive that faculty support academic integrity in nursing education had lower neutralization scores. Interestingly, when different source effectiveness variables were added into the neutralization regression model, the most significant predictors were faculty and the course syllabus. Students encounter faculty and course syllabi in every course throughout the nursing program. As students recognize these encounters, they may have been less likely to neutralize a violation of academic integrity because "it wasn't stated in the syllabus" (Wideman, 2011, p. 34). The two single items assessing general perceptions of faculty behaviors and course syllabi appear to be predictive of decreasing neutralizing behaviors, but that these also appear to be redundant with the perceived faculty support of academic integrity policies subscale. Minimally, it is important for faculty to continue

the measures currently taken to enforce academic integrity policies and deter dishonesty. However, continued evaluation and adaptations to address academic integrity violations should be considered.

A positive correlation was found between the areas of source effectiveness and perceived faculty support of academic integrity policies. The linear regression found that first-year orientation, faculty, deans and other administrators, the course syllabus, other students, and the campus website were all significant predicting factors of student perceptions of faculty support of academic integrity policies. Interestingly, the source effectiveness variable residential advisors were also found to be correlated to student perceptions of faculty support. Residential advisors are typically upperclassmen who are assigned to work in dormitories. The sources students receive information regarding academic integrity on the campus is vital to the communication support students need to maintain a culture of integrity (Löfström et al., 2015; Morgan & Hart, 2013; Nierenberg, 2017; Smedley et al., 2015).

Examining faculty response to cheating, this study identified that faculty take proactive measures to change exams regularly, randomize questions on exams, and utilize plagiarism detection software. These actions are also key actions identified by Arhin (2009), McCabe et al. (2001), and Park et al. (2013). These findings support the need to continue to implement consistent communication from multiple sources to convey the significance of academic integrity policies in undergraduate nursing programs.

Implications

Results indicate that students perceive that faculty do discuss issues related to preventing plagiarism, policies related to academic integrity, and the syllabus at the beginning of classes. However, more open communication related to clinical preparation, care plans, and upcoming

checkoffs is needed to maintain a culture of integrity. Overall, the study suggests that students do perceive that faculty are vigilant during exams to deter violations of academic integrity through changing exam questions, investigating suspected cases, proctoring, and randomization as needed. However, students did not endorse a specific way faculty can deter cheating in the laboratory or clinical settings.

In this study, it was found that students who had lower neutralization scores did perceive that faculty had a stronger response to cheating in nursing programs. Age was found to impact the student's likelihood to neutralize behaviors related to academic integrity, but interestingly, the year in the program was not found to be significant. This result is interesting because in many cases, students in the first part of a traditional nursing program are typically younger, with a few non-traditional older students returning to start a new career. This finding does indicate that older students were less likely to rationalize cheating behaviors related to making their parents proud of their success or helping peers be successful. Faculty should remain vigilant to detect neutralizing characteristics of students when rationalizing suspected engagement in dishonest behaviors. Early and consistent communication is essential to help students understand the importance and connections between academic integrity and nursing practice.

Direction for Future Research

The findings support the need for future research. This study examined only student perceptions related to academic integrity in undergraduate nursing programs. Exploring faculty perceptions as well could be beneficial for comparison purposes. Investigating ways to improve sources of information such as student handbooks, training of advisors and faculty advisors about academic integrity adds another avenue to discuss academic integrity policies and the importance of academic integrity policies, especially in nursing programs. Having an experimental study

design, with an interventional module, might provide faculty insight if the actions currently being taken are providing enough support or if another avenue needs to be explored. Additionally, an interventional module that includes vignettes related to situations involving possible integrity violations could provide students with a greater understanding of how faculty integrate academic integrity policies into the classroom. To better examine if a relationship exists between age or year in the program and perceived faculty support or neutralization, a longitudinal study would provide cohort data over time to detect any changes. Continuing to understand demographics related to academic integrity might provide more insight regarding students who engage in dishonest behaviors and those who tend to neutralize these behaviors as well. Future research can help support the premise that nursing is identified as one of the most trustworthy professions. Nursing programs must continue to monitor the academic integrity climate ensuring that honesty and trustworthiness are maintained in undergraduate programs.

Limitations

One of the major limitations of this study was the period in which it was conducted. The online learning demands created by the COVID-19 pandemic have most certainly led to internet fatigue. Many students are overwhelmed with school and outside responsibilities and may not have read the survey questions or decided not to participate. Since there was also a $10 Amazon gift card for respondents who completed the survey, there is also the potential that students simply went through the survey marking answers to receive the incentive. To mitigate that threat, four participants' data were excluded from analysis for completing the survey in less than 5 minutes.

Another limitation was that researchers had to close the survey with participants still in the process due to budget constraints. When the collaborative research team discovered that over

1,000 surveys were in progress, the decision was made to close the survey. Additional data would have enhanced the results; however, this was not possible based on the availability of funding.

Strengths

Several strengths were identified with this study. First, there was a large sample size of students. This sample responded extremely quickly, and more responses could have possibly been collected. Approximately 40% of the sample identified having an ethnic minority or mixed ethnic background. Finally, while the MAIS-MNS is a modified version of McCabe's Academic Integrity survey, this is the first version to present psychometric properties on the original survey questions and with the added scales.

Conclusion

Academic integrity remains a topic and issue that should be routinely examined and discussed, especially related to undergraduate nursing programs. It is imperative to determine the best ways to educate nursing students related to course expectations and provide means to maintain a culture of integrity. Faculty should be vigilant to ensure that communication remains open throughout the nursing program. Open communication will remain a critical aspect of the faculty's responsibility to maintain this culture. Without faculty support and open communication, integrity in nursing programs may diminish and jeopardize the high levels of trust and honesty expected in nursing practice.

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Table 3.1

Subscale Correlations Table

	1	2	3	4	5	6	7
1. Source Effectiveness	-	-.194*	.582*	.388*	-0.47	-.033	-.089
2. Neutralization	-.194*	-	-.246*	-.246*	-.180*	-.045	-.153*
3. Perceived Faculty Support of Academic Integrity Policies	.583*	-.246*	-	..457*	.026	.008	-.014
4. Perceived Faculty Response to Cheating	. 388*	-.246*	.457*	-	0.11	-.053	.077
5. Age	-.047	-.180*	.026	.011	-	.424*	.032
6. Year in the Program	-.033	-.045	.008	-.053	.424*	-	.047
7. Knowledge Assessment Score	-.089	-.153*	-.014	.077	.032	.047	-

Note. Spearman's rho coefficients are significant *$p < .01$, $n = 442$

Table 3.2

Regression Analysis Summary for Predicting Neutralization

	Variable	*B*	*SE B*	ß	*t*	*p*
1	(Constant)	24.436	2.175	.000	11.232	.001
	Perceived Faculty Support of Academic Integrity Policies Subscale	-.080	.031	-.129	-2.528	.012
	Faculty Response to Cheating Subscale	-.073	.028	-.135	-2.639	.009
	Age	-.137	.042	-.157	-3.286	.001
	Year in the Program	.000	.352	.000	.000	1.00
2	(Constant)	30.487	2.605	.000	11.702	.001
	Perceived Faculty Support of Academic Integrity Policies Subscale	-.045	.036	-.072	-1.238	.217
	Faculty Response to Cheating Subscale	-.058	.028	-.107	-2.033	.043
	Age	-.131	.042	-.150	-3.114	.002
	Year in the Program	-.107	.351	-.015	-.306	.760
	First Year Orientation	.178	.348	.027	.511	.610
	Campus Website	-.231	.342	-.039	-.674	.501
	Student Handbook	-.237	.389	-.034	-.609	.543
	Program Counselor	-.019	.364	-.004	-.053	.958
	Residential Advisor	.315	.369	.056	.853	.394
	Advisor	-.057	.368	-.011	-.156	.876
	Faculty	-1.246	.464	-.147	-2.686	.008
	Other Students	.178	.310	.031	.574	.566
	Dean or Other Administrators	.191	.311	.037	.613	.540
	Course Syllabus	-1.255	.558	-.119	-2.247	.025

Note. Model 1 Results: $F(4, 436) = 8.94$, $p < .001$, $R^2 = .076$
Model 2 Results: $F(10, 426) = 2.08$, $p < .001$, $R^2 = .119$

Table 3.3

Regression Analysis Summary for Source Effectiveness Predicting Faculty Support of Academic Integrity Policies

Variable	*B*	*SE B*	ß	*t*	*p*
(Constant)	13.22	2.82	0.00	4.69	< .001
First year orientation	1.35	0.47	0.13	2.87	.004
Campus website	1.13	0.47	0.12	2.40	.017
Student handbook	0.20	0.54	0.02	0.36	.716
Program counselor	1.12	0.50	0.13	2.24	.026
Residential advisor	-0.60	0.50	-0.07	-1.20	.231
Advisor	0.78	0.51	0.10	1.53	.126
Faculty	1.29	0.64	0.09	2.03	.043
Other students	1.15	0.42	0.13	2.71	.007
Dean or other administrator	1.06	0.43	0.13	2.48	.013
Course Syllabus	2.23	.769	0.13	2.90	.004

Note. Results: $F(10, 431) = 22.58$, $p < .001$, $R^2 = 0$.

Chapter VI

Promoting a Program Culture That Increases Peer Reporting of Academic Integrity Violations

Academic integrity among students is a value endorsed by universities around the world. However, violations of academic integrity are widespread across continents and disciplines (Birks et al., 2018; Krueger, 2014; McCabe & Trevino, 1997). Academic integrity implies that student behaviors and actions are honest and trustworthy in the educational setting. Violations of academic integrity can include cheating, plagiarism, unauthorized collaboration on assignments, falsifying data, and a wide variety of other dishonest behaviors. While students have been cheating on examinations or plagiarizing papers for decades, there is a concern among those in academia that students have become more sophisticated in the methods they use to violate academic integrity (Ahrin, 2009). When a university confers a degree on a student, there is the assumption that the degree was earned and that the graduate is prepared to enter their chosen field. Violations of academic integrity bring that assumption into question.

Nursing is considered one of the most trusted professions and it is of concern that violations of academic integrity as a nursing student could influence the integrity of one's future nursing practice (McCabe, 2009). Integrity is important for graduates of all fields, and nursing students have the added responsibility of caring for the health and welfare of the public upon graduation. Krueger (2014) explained that the independence granted to practicing nurses necessitates that nurses possess integrity and promote honesty for the safety of their patients. Part of promoting a culture of integrity is acknowledging the responsibility to report peer violations. For example, a student nurse reporting a peer for cheating during an exam or a practicing nurse

reporting a peer for diverting narcotics both help foster integrity of the academic program or the hospital unit.

Three principal investigators, Shannon Stevenson, Kathryn Flannigan, and Amanda Willey, formed a collaborative research team to investigate nursing student knowledge and attitudes regarding violations of academic integrity using a research team-modified scale created by Donald McCabe (McCabe & Trevino, 1993) that has been previously modified by various researchers over the last three decades. For the current study, items were added to the survey that are designed specifically for nursing students in the classroom, clinical, or laboratory settings. These include items on topics such as unauthorized collaboration, falsifying clinical data, and sharing confidential information on simulation scenarios with other students. Items regarding the willingness to report peer violations of academic integrity in the classroom, clinical, and laboratory settings were also modified to fit the study's population. Also included were items from McCabe's original survey that evaluate student perceptions of the likelihood of success of various program-wide strategies that can promote a culture of academic integrity. The focus of this article is to examine factors hypothesized to encourage a willingness to report peer academic integrity violations: student perception of the severity of various violations, student perception of faculty support regarding policies that enforce academic integrity, and student perception of program-wide improvement strategies.

Background

When discussing what fosters a culture of academic integrity and peer reporting, it is important to explore the offenses that violate academic integrity and that often go unreported. As discussed by Kolanko and colleagues (2006), nursing students cheat for a variety of reasons. They may cheat because they feel as if they are competing with their peers for higher grades or

distinct honors, because they need high grade point averages to be competitive for graduate studies, or because they feel pressure to achieve "perfection" as nurses (p. 35). Peer reporting is an important component of academic integrity because oftentimes students are the ones who witness a violation and are aware of dishonest behaviors among their classmates. If students know that their classmates, and future colleagues, will hold them accountable for acting with integrity, perhaps they will be less tempted to cheat. Peer reporting by students that results in enforcement of academic integrity policies mirrors peer reporting by nurses that results in disciplinary action or systems-based change to prevent patient harm. In order to foster a program-wide culture of academic integrity, exploration of the willingness to report peers is needed as well as further research investigating hurdles that prevent students from reporting violations.

Willingness to Report Peer Violations

Students hesitate or refrain from reporting their peers for violating academic integrity. McCabe et al. (2001) explored rationales for the lack of peer reporting and found that students fear ostracization from their social network and have difficulty identifying violations of academic integrity policies at their universities. They err on the side of loyalty to the peer group rather than reporting an event they are uncertain about. Even during obvious violations, such as cheating on an exam, Teodorescu and Andrei (2009) found that while 85% of their participants said they have seen a peer cheat during an examination, only 4% would report it. Theart and Smit (2012) found their participants, despite feeling like cheating was wrong, also demonstrated an overwhelming hesitancy to report violations they might witness.

Students should be aware that the importance of peer accountability does not disappear upon graduation. It is evident in healthcare systems as well. For professional nurses, employment

within an organization that encourages reporting could lead to an increased rate of peer and self-reporting of ethical violations or medical errors. Error reporting promotes a culture of integrity. As explored by Hewitt et al. (2017), working in such facilities allows nurses to learn from their mistakes, depending on the severity of the offense, and frames reporting as a vital part of quality improvement and patient safety. By addressing students' hesitancy to report peer violations before those students enter professional practice, nursing faculty can ensure graduates understand the importance of integrity.

Perception of Severity of Offenses

One obstacle that may prevent students from reporting their peers is that they may be unsure if what they witness is a violation of academic integrity. Violations of academic integrity have been noted to occur in all areas of higher education, not only within nursing programs. In a study of 6,000 undergraduate students at 31 institutions of higher education, it was identified that one in three undergraduate students have cheated during their college career (McCabe & Trevino, 1997). Additionally, 2,100 students were surveyed in 1999 through the Center for Academic Integrity and it was found that 68% had committed one or more violations of academic integrity (Owings, 2002, as cited in Boehm et al., 2009). McCabe (2009) found that 58% of surveyed nursing students admitted to committing a violation of academic integrity while in nursing school. When comparing nursing students to other college students, Arhin and Jones (2009) found that nursing students were able to identify dishonest actions more often than students in other academic areas. However, this was mainly when identifying dishonest behaviors related to exams. When it came to identifying other types of violations of academic integrity within the classroom and laboratory setting nursing students also had difficulty.

Arhin (2009) identified that many students believe academic integrity violations occur along a continuum, with some offenses being worse than others. This belief may lead to students engaging in violations of academic integrity based on the false notion that small offenses are not cheating and are of little consequence. Additionally, if students believe offenses are of little consequence, they may see no reason to report peers known to be engaging in these behaviors. According to a recent Gallup poll, nursing is the most trusted profession in America (Brenan, 2018). That trust makes it concerning that students may be cheating their way into the profession. Dishonesty as a nursing student could lead to practicing nurses who do not possess the knowledge and competencies required to practice safely as they enter professional practice.

Additionally, Park et. al (2013) discovered that students who disclosed cheating in high school were more likely to disclose that they cheated in nursing school. This gives rise to concerns that individuals who engage in dishonest behaviors do so habitually. This could indicate that their dishonest behaviors may continue upon entry into the nursing profession. Misconceptions related to academic integrity that are not clarified while the student is enrolled in the nursing program could lead to potentially negative outcomes in patient care. Therefore, it is important to educate nursing students that all violations of academic integrity are significant and carry the potential to do harm. If students understand the significance of cheating, they may also understand the need to report when they witness it.

Perception of Faculty Support of Academic Integrity Policies

Another deterrent to peer reporting may be that students feel as though their faculty do not talk about academic integrity policies or enforce them consistently. Students can locate their university's academic integrity policies in campus policies, student handbooks, course syllabi, and institutional honor codes. While these policies are available to students and students are

expected to review them, the need remains for faculty members to communicate these policies directly to students (Hart & Morgan, 2010; McCabe & Trevino, 1993; McCabe, et al., 1999; Morgan & Hart, 2013). Faculty should remain vigilant in discussing such policies and ensuring that they are enforced appropriately and consistently (McClung & Schneider, 2018; Woith et al., 2012). To facilitate this, faculty can review academic integrity policies at various points throughout the program, including orientation, at the beginning of each course, and as a specific need arises (Azulay Chertok et al., 2014; Löfström et al., 2015; McCabe et al. 2001). This open communication and enforcement supports high ethical standards during the nursing program and instills the core value of integrity in students as they become professional nurses.

McCabe et. al (2001) found that students desired clear expectations for their assignments and valued open communication regarding academic integrity policies. However, regardless of the information that faculty provide, the onus is on students to uphold academic integrity in their nursing program by abiding by those policies. Clear communication of what is considered an academic integrity violation by faculty may reduce student engagement in dishonest behaviors. (Hart & Morgan, 2010; McClung & Schneider, 2018; Oran et al., 2016; Thakkar & Weisfeld-Spoter, 2012; Theart & Smit, 2012). Open and frequent communication about academic integrity is critical in promoting positive student perceptions of their faculty's support of academic integrity policies. This positive perception may lead to increased peer reporting if students believe their concerns will be addressed fairly and according to policy.

Program-Wide Strategies to Promote a Culture of Academic Integrity

While a better understanding of the severity of offenses and strong faculty support for policies may encourage peer reporting, there are program-wide interventions that can promote reporting as well. Creating a culture of academic integrity can promote peer reporting by

fostering an atmosphere that embraces the responsibility of the student to uphold the integrity of the program and work to maintain the public's trust in the nursing profession. Chunta and colleagues (2019) discussed several recommendations to promote academic integrity including recurrent education, a code of conduct, clear communication regarding expectations, and preventing the temptation to cheat.

Open and frequent communication fosters a culture of academic integrity. This exchange between faculty and students promotes a sense of shared responsibility to uphold the standards outlined in university policies. If students see that faculty are supportive of academic integrity policies, and enforce them fairly, students are more likely to follow the policies as well (McClung & Schneider, 2018; Woith et al., 2012). In addition to open communication regarding policy, communication about how a student can prevent violations related to their written work can be useful. One way to deter violations of academic integrity related to plagiarism is the use of plagiarism detection software. This software detects if a student has used material from another source in the current written assignment (Wilkinson, 2009). Communication regarding what constitutes plagiarism can provide foundational knowledge and how to avoid the offense (Nierenberg, 2017; Smedley et al., 2015). By encouraging students to use anti-plagiarism software, faculty can demonstrate their desire to provide students with opportunities to prevent violating academic integrity. With open communication and use of resources such as anti-plagiarism software, a culture of integrity can be fostered among faculty and students.

Another program-wide suggestion to promote a culture that supports peer reporting is the implementation of an honor code. Honor codes have been implemented at various institutions for decades. McCabe and Trevino (1993) explored the reasons why honor codes may be successful at creating a culture of integrity that promotes peer reporting. One reason is that honor codes

delineate expectations regarding what is considered a violation of academic integrity. Another explanation is that honor codes empower students with the responsibility to uphold integrity, rather than only relying on faculty and university leadership to do so. Lastly, McCabe and Trevino explain that students enrolled at universities with honor codes often are given "privileges such as unproctored exams" (p. 525). Students may abide by the honor code to ensure these privileges are retained.

Another strategy to promote a culture of integrity is to prevent the temptation to cheat. Preventing temptations of cheating includes multiple actions on the part of the faculty and nursing program. These may include using various copies of an exam, lockdown browsers for online testing, randomized seating during exams, and removing electronic devices from students while testing. While these preventative measures can be implemented in the classroom and online settings, it is more difficult to include preventative strategies in the clinical or laboratory setting. A potential strategy to prevent the temptation to violate academic integrity in all settings, including the clinical and laboratory settings, is to ensure sanctions are consistent and fair for those who commit violations of academic integrity. Penalties for engaging in violations of academic integrity can range from a verbal warning to dismissal from the university. Sanctions may include written warnings presented as teachable moments, failure of the assignment, being removed from a clinical agency, failure of a course, documentation of violations on transcripts, documentation in the student file, and removal from the nursing program. Kolb et al. (2015) identified fear of consequences as a reason students may not engage in violations of academic integrity. However, if students feel the benefits of cheating outweigh the risks, they are willing to engage in dishonest behaviors (Hutton, 2006). Therefore, if students are aware that violators will consistently be held responsible for their actions it may encourage them to become more familiar

with what constitutes academic integrity, deter them from committing violations, and encourage them to report peer violations they witness.

In summary, there are tangible ways to promote academic integrity and address obstacles that prevent peer reporting of academic integrity violations: increasing student knowledge of the severity of offenses, demonstration of clear faculty support of policies, and program-wide strategies that encourage a culture of reporting. To assess student perceptions surrounding these variables, the research questions for this collaborative article are:

1. Among pre-licensure, baccalaureate nursing students, are student perceptions of severity of violations, perceptions of faculty support, and support for program improvement strategies positively related to willingness to report peer violations as measured by the MAIS-MNS?
2. Controlling for the other variables, which variables are the best predictors of the willingness to report peer violations of academic integrity?

Methods

Design

This study utilized a cross-sectional, correlational design. This article is a result of a collaborative effort by three doctoral students investigating academic integrity in undergraduate nursing students.

Participants

Participants were recruited through the National Student Nurse Association (NSNA). Permission was obtained from Diane Mancino, Executive Director of the NSNA, to recruit participants via the organization's email database. There are approximately 49,000 members of the NSNA. These students are enrolled in Associate Degree (AD), Bachelor of Science (BSN),

diploma, and master's programs nationwide. Approximately 36,000 of these members are enrolled in a BSN program (National Student Nurse Association, 2021). Inclusion criteria for this study were that participants must be: (1) undergraduate BSN students and (2) over 18 years of age. Exclusion criteria included (1) being under the age 18 years and (2) enrollment as an associate degree, diploma, or RN-BSN student.

To calculate the needed sample size, the parameters to detect a significant correlation were established as $r = 0.20$, α (two-tailed) = 0.05, and a power of 0.80. The needed sample size to detect a significant correlation was 194. This sample size was feasible to achieve with the number of NSNA students contacted during recruitment. As cited by the National League for Nursing (2015), 15% of nursing students identify as male, therefore the study sample was expected to reflect typical gender distribution in nursing programs, which is largely skewed towards females.

Instrument

The instrument for this study is a modified version of McCabe's Academic Integrity Survey. McCabe's Academic Integrity Survey (see Appendix C) has been utilized at the high school, undergraduate, and graduate levels to assess student engagement in cheating and their comprehension of academic integrity policies. The International Center for Academic Integrity (2017) reports that McCabe's survey has been administered to over 70,000 high school students, 71,000 undergraduate students, and 17,000 graduate students. Prior studies have utilized selected portions of McCabe's Academic Integrity Survey in their research with students (McCabe & Trevino, 1993; McCabe et al., 2001; McCabe, 2009). Additionally, subscales of McCabe's Academic Integrity Survey have previously been used in studies on academic integrity in nursing students (Hart & Morgan, 2010; Krueger, 2014; Morgan & Hart, 2013). While components of

McCabe's original survey were relevant to the current study, there were no nursing-specific questions and the survey contained questions that were not relevant to the study sample. Therefore, permission was received to modify the instrument as needed to meet the collaborative research team's needs (see Appendix D).

The modified survey, the McCabe's Academic Integrity Survey-Modified for Nursing Students (MAIS-MNS) (see Appendix E), consists of 139 items measuring: (1) campus attitudes, (2) source effectiveness, (3) subjective knowledge, (4) neutralization, (5) perceived faculty support of academic integrity policies, (6) occurrences of academic integrity violations, (7) awareness of occurrences, (8) student perceptions of severity, (9) willingness to report peer violations, (10) perceived faculty response to cheating, and (11) suggestions for program improvement. All items were assessed and modified, if needed, for use with undergraduate nursing students. To address the research questions posed in this article, four subscales were analyzed: Perceptions of Severity, Perceptions of Faculty Support of Academic Integrity Policies, Program Improvement Suggestions, and Willingness to Report Peer Violations.

Procedure

Pre-licensure baccalaureate nursing students were surveyed on various aspects of academic integrity. With Institutional Review Board (IRB) approval from Teachers College, Columbia University, an authorized representative of the National Student Nurses' Association (NSNA) sent a recruitment email with the survey link to approximately 36,000 NSNA members enrolled in pre-licensure baccalaureate programs. Upon clicking the link, all prospective participants were directed to Qualtrics to review the informed consent.

Students who chose to participate in the study by consenting were directed to the Qualtrics survey that included the MAIS-MNS. Survey completion was estimated to take 35-40

minutes, depending on reading speed. Upon completion of the survey, participants were prompted to enter their email address if they elected to receive a $10 Amazon gift card to thank them for their participation. Due to budgeting constraints, recruitment was closed after the first 450 participants completed the survey.

Data Analysis

Data were exported from Qualtrics to Excel and reviewed for outliers and missing data. Two participants were removed as they did not consent to the study. Four participants who completed the survey in five minutes or less were also removed from the data set as the collaborative research team felt that was the minimum time it could take to complete a survey of such length. The final sample size was $N = 442$. Following coding, data were imported into SPSS for analysis. The program improvement items were analyzed individually to assess participant support for each suggested improvement as well as analyzed as a subscale. To establish the reliability of the subscales discussed in this article, Cronbach's alpha was calculated for each and are as follows: Perceptions of Severity (.929), Perceived Faculty Support of Academic Integrity Policies (.886), Program Improvement Suggestions (.715), and Willingness to Report Peer Violations (.968). Cronbach's alpha for the entire MAIS-MNS, excluding demographic questions, was .922.

Results

Perceptions of Severity Subscale

The individual summed scores for the 30-item Perceptions of Severity subscale ranged from 31-120, with a mean score of 89.70, a median score of 91, and a standard deviation of 14.4 (Table 4.1). Of the 30 items on the subscale, 15 were from McCabe's original survey and 15 were developed by the collaborative research team to specifically assess nursing student

perceptions. The higher the score on the subscale, the more severe the identified behaviors were rated along the continuum of "not cheating" to "severe cheating." Forty-one percent of students believed working with peers when individual work was requested was considered "trivial cheating" while 40.5% believed it would be considered "moderate cheating." Discussing an exam with a peer in a different course section who had not yet taken the exam was perceived as "severe cheating" or "moderate cheating" by 63.3% of students. However, 60.6% of students felt that using an unauthorized test bank of previous exam questions maintained by student groups or Quizlet to prepare for an exam was "not cheating." With respect to clinically based behaviors, 73.1% of students identified that documenting vital signs that they did not obtain was "severe cheating" or "moderate cheating." Only 49.2% of students identified discussing a simulation lab with students who have not yet completed it as "moderate cheating" or "severe cheating." Item descriptive statistics are presented in Appendix G.

Perceptions of Faculty Support of Academic Integrity Policies Subscale

The individual summed scores for the 12-item Perceived Faculty Support of Academic Integrity Policies subscale ranged from 12-60, with a median score of 43, and a standard deviation of 9.888 (Table 4.1). Four of the items were from McCabe's original survey, two were modified, and six items were added. A higher score on the subscale indicates that students perceive that faculty members support and discuss academic integrity policies with them. Over 80% of the students reported that faculty "often" or "very often" provided information about proper citations or referencing of written or internet sources. Regarding falsifying data in course labs, 45.9% of students reported that faculty "often" or "very often" discussed this topic with them, while 51.1% of students reported faculty "often" or "very often" discussed falsifying clinical data. Students also relayed that faculty "often" or "very often" emphasized the

importance of not discussing patient information outside of the post-clinical conference (70.3%) and not discussing patient information in common areas (71.3%). A large majority (89.1%) of students reported that faculty "often" or "very often" discussed policies related to academic integrity at the beginning of a course. Item descriptive statistics are presented in Appendix G.

Program Improvement Suggestions Subscale

Four items describing different program improvement suggestions were analyzed for support for each suggestion. These items are found on McCabe's original survey but were modified from a "select all that apply" format into a Likert-type scale. The suggestions were (1) implementing an honor code, (2) better education regarding academic integrity at the beginning of the program, (3) harsher sanctions for violations of academic integrity, and (4) the use of anti-plagiarism software like TurnItIn or SafeAssign. Better education can be interpreted as providing students with more robust information on what academic integrity means and how it relates to their program of study. Participants selected whether they thought each suggestion would "unlikely" "somewhat" or "likely" improve academic integrity in their nursing programs.

The individual summed scores ranged from 4-12, with a median score of 10 and a standard deviation of 2.09 (Table 4.1). A higher total score indicates stronger support for the program improvement suggestions. Participant support for these suggestions was high. Over 81% reported that an honor code would at least somewhat improve academic integrity in their program. Support for more education regarding academic integrity at the beginning of the program was over 85%. Participants also supported harsher sanctions for violations (83%) and the use of anti-plagiarism software (93%). Item descriptive statistics are presented in Appendix G.

Willingness to Report Violations Subscale

The individual summed scores for the 16-item Willingness to Report subscale ranged from 16-64, with a median score of 37 and a standard deviation of 11.96 (Table 4.1). Two items from McCabe's original survey were included while 14 were added to ask about reporting in the context of a nursing program. A higher total score on the subscale indicates being more likely to report peer violations of academic integrity. Almost half (49.5%) of participants stated that they were "very unlikely" or "unlikely" to report a peer they observed cheating on an exam. For online exams, 52.5% were "very unlikely" or "unlikely" to report a peer they observed cheating. Over 55% were "very unlikely" or "unlikely" to report a peer they observed cheating in the simulation or laboratory setting. In the clinical setting, 30.8% were "very unlikely" or "unlikely" to report a peer violation if the participants thought the violation could not cause patient harm. Alarmingly, 12.2% of participants were still "very unlikely" or "unlikely" to report a violation even if they thought it could cause patient harm. Over 60% felt like the typical student in their program was "very unlikely" or "unlikely" to report a violation they witnessed and 75% believed the typical student in their program would not report a close friend for cheating. Item descriptive statistics are presented in Appendix G.

Correlations

To address the first research question posed in this article, correlations between the subscales were assessed (Table 4.2). As the data were not normally distributed, Spearman's rho was chosen as it is a non-parametric test. The Perceived Faculty Support of Academic Integrity Policies and Willingness to Report subscales had a positive correlation of .298, signifying that the more students felt that faculty supported their universities' academic integrity policies and

discussed them in their courses, the more willing students were to report peer violations they witnessed.

The Willingness to Report and Perceptions of Severity subscales had a moderate positive correlation of .485. The more a student understood what was considered a violation, the more likely they were to be willing to report peer violations. The Program Improvement Suggestions subscale and Willingness to Report subscale were also positively correlated at .231. The stronger a student believed implementation of program-wide strategies could prevent violations of academic integrity, the higher their score on the Willingness to Report subscale. To assess whether certain improvement suggestions were more significantly correlated with willingness to report peer violations, each item's correlation with the Willingness to Report subscale was calculated (Table 4.3). While all suggestions were positively correlated with Willingness to Report, only two were significantly so: implementing an honor code (.293) and better education at the onset of the nursing program (.239).

Regression Analysis

To address the second research question, a regression analysis was performed to assess the predictive ability of variables on participants' willingness to report peer violations. The independent variables were: (1) scores on the Perception of Faculty Support of Academic Integrity Policies subscale, (2) scores on the Perceptions of Severity subscale, and (3) the two program improvement suggestions, implementing an honor code and better education at program onset, that had significant correlations with scores on the Willingness to Report Peer Violations subscale (Table 4.4). The model was statistically significant, explaining 29.2% of the variance in Willingness to Report subscale scores ($R^2 = .292$, $F(4, 441) = 45.036$, $p < .001$). Both subscale scores uniquely contributed to the variance. Perceptions of Severity scores uniquely accounted

for 13.6% of the variance and Perception of Faculty Support of Academic Integrity scores uniquely accounted for 2.1% of the variance. Implementing an honor code made a unique contribution to the predictive model, accounting for 1.5% of the variance. Better education at program onset did not uniquely contribute to the model in a significant way.

Discussion

Overall, the results demonstrate that students' perceptions of severity and their perceptions of faculty support of academic integrity policies positively correlate with their willingness to report peers for violating academic integrity. Understanding what constitutes a violation of academic integrity and feeling as though faculty effectively communicate about and support academic integrity-related policies leads to an increased willingness to report violations. Additionally, students believe program-wide interventions could help create a culture of academic integrity by preventing cheating. At a minimum, implementing an honor code and providing students with more education regarding academic integrity upon matriculation may help increase perceptions of faculty support as well as willingness to report peer violations.

Implications

Results from this study show that there are discrepancies in student awareness of what constitutes a severe violation of academic integrity and willingness to address these behaviors when they witness a peer violation. The results also provide tangible strategies for nursing faculty to implement to address those discrepancies. Many times, faculty within nursing programs believe that students learn about academic integrity earlier in their prior academic careers and know how to report violations. Unfortunately, the data presented in this study shows that may not be the case and that students want more information as they start their nursing education. Although students stated they would report peers in the clinical setting if they had a

concern relating to patient care, this reporting can only happen when students are aware that a particular behavior is a violation of academic integrity. More education can provide students with an awareness of what is considered a violation and the need to report a violation when they witness it. Furthermore, could a violation during clinical experience be prevented if students were aware of the severity of offenses and knew that consequences would be dealt with consistently?

It is important for faculty to be aware of and support the university's policies related to academic integrity. As evidenced in this study, students are more likely to identify violations as severe and report them if they believe their faculty supports the enforcement of academic integrity policies. Faculty appear to be discussing plagiarism, proper citations, syllabi review, and not discussing patient details in public, but they may not be as effective in addressing concepts related to copying and pasting care plan information, using parts of a peer's care plan, or sharing information about an assignment with others. These behaviors are violations of academic integrity and faculty should address them as such. An honor code would provide faculty with a reliable blueprint for addressing academic integrity with their students. An honor code could also facilitate student buy-in to accept their responsibility in upholding the integrity of their nursing program by reporting peer violations.

Direction for Future Research

The findings of this study support the need for further research on the topic of academic integrity in schools of nursing and how to best promote a culture that empowers students to report peer violations. Possessing academic integrity not only encourages taking ownership of one's knowledge in order to be successful as a nurse, but it also promotes the moral and ethical development needed to care for individuals during their times of need. The demands of nursing

school are well-known and targeted interventions that increase knowledge of academic integrity early in the nursing program, such as utilizing online learning modules during orientation, could be a way to promote academic integrity in students as they begin a rigorous field of study.

Limitations

One of the major limitations of this study was the time period in which it was conducted. The online learning demands created by the COVID-19 pandemic may have led to internet fatigue. Many students are overwhelmed with school and outside responsibilities and may not have clearly read the survey questions or decided not to participate. Since there was also a $10 Amazon gift card for respondents that completed the survey, there is also the potential that students simply went through the survey marking answers to receive the incentive. To mitigate that threat, four participants' data were excluded from analysis for completing the survey in less than five minutes.

Another limitation is that the MAIS-MNS is a new instrument that underwent significant modifications from its predecessor. There is a lack of evidence for concurrent validity as there is no comparison of results from the modified survey to McCabe's original survey. There is also a lack of evidence for the instrument's construct validity. Based on the limited amount of variance explained by the regression analysis, there are additional variables that impact willingness to report peer violations that remain to be studied.

Another limitation was that due to budget constraints, researchers had to close the survey with participants still in the process of completing the questionnaires. When the collaborative research team discovered that over 1,000 surveys were in progress, the decision was made to close the survey. Additional data would have enhanced the results, however, was not possible based on availability of funding.

Other limitations include the chance for participant concerns regarding their anonymity or response bias with participants wanting to give the answer they felt was correct even if it wasn't their honest response. Although students were told there was no identifying data with the survey, there may have been a concern with remaining anonymous and the potential that they may get in trouble for disclosing information regarding academic integrity violations.

Conclusion

The need to further educate nursing students on academic integrity is apparent. As expected, this study supports that students have varied opinions on how supported they feel by faculty and what constitutes violations of academic integrity. Additionally, students vary greatly in their likelihood of reporting dishonest behaviors. It is necessary to find ways to promote the willingness to report peer violations not only while one is in nursing school, but as one enters the profession as well. By providing better education and creating a culture of integrity on campus, students may feel their reports will be taken seriously to uphold the integrity of the program and safeguard the public from dishonest nurses. The hope is that values related to integrity would remain with the student well past graduation and into their practice. Without interventions aimed at defining and promoting academic integrity, including the responsibility to report peer violations, there will continue to be violations of this nature that could impact patient care in all settings.

Chapter IV References

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Table 4.1

Descriptive Statistics for Subscales

Subscale	Mean	SD	Median	Possible Range	Range	Kurtosis
Perceptions of Severity	89.69	14.4	91	30-120	31-120	.64
Perception of Faculty Support of Academic Integrity Policies	42.96	9.89	43	12-60	12-60	-.47
Willingness to Report	39.47	11.96	37	16-64	16-64	-.41
Program Improvement Suggestions	9.51	2.09	10	4-12	4-12	-.62

Table 4.2

Subscale Correlations

Measure	1	2	3	4
1. Perceived Faculty Support of Academic Integrity Policies	___	.298	.301	.248
2. Willingness to Report Subscale	.298	___	.485	.231
3. Severity Subscale	.301	.485	___	.267
4. Program Improvement Suggestions Subscale	.248	.231	.267	___

Note. All Spearman's rho coefficients are significant at $p < .01$. $n = 442$.

Table 4.3

Individual Program Improvement Suggestions Correlations with Willingness to Report

Measure	1	2	3	4	5
1. Willingness to Report Subscale	___	.293	.239	.079*	.074*
2. Honor Code	.293	___	.582	.292	.338
3. Better Education at Program Onset	.239	.582	___	.351	.381
4. Harsher Sanctions	.079*	.292	.351	___	.487
5. Anti-Plagiarism Software	.074*	.338	.381	.487	___

Note. All Spearman's rho coefficients are significant at $p < .01$, except where non-significant findings are indicated with *; $n = 442$.

Table 4.4

Regression Analysis Summary for Variables Predicting Willingness to Report Peer Violations

Variable	*B*	*SE B*	ß	*t*	*p*
Perceptions of Faculty Support of Academic Integrity Policies Subscale	.189	.052	.157	3.626	<.001
Perceptions of Severity Subscale	.327	.036	.394	9.164	<.001
Implementing an Honor Code	2.452	.810	.152	3.028	.003
Better Education at Program Onset	.479	.817	.029	.586	.558

Note. $R^2 = .292$ ($n = 441$, $p < .01$).

Chapter V

Conclusion

Nursing students have a positive perception of faculty support related to academic integrity. Both faculty and students need to work together to maintain a culture of academic integrity throughout a nursing program. Students have identified actions faculty take to promote academic integrity in the classroom and clinical settings, and ultimately it is the student's responsibility to maintain these expectations.

Findings of this study indicate that students did recognize faculty discussed academic integrity regularly and responded appropriately to violations. Students noted discussions related to academic integrity policies occurred at the beginning of a class and the policies were identified in the syllabus. Other researchers have also noted the importance of faculty involvement through clear communication of expectations (Robinson & Glazer, 2017; Tippitt et al., 2009). Faculty were also found to provide guidelines on group work and how to properly cite references when incorporated into assignments. In the clinical setting, it was evident students felt faculty addressed the proper locations to discuss patient information to protect patient rights.

While it is important for faculty to discuss the values of maintaining a culture of integrity in nursing programs, their actions are also critical. A majority of students identified faculty investigated violations of academic integrity fairly and impartially. By handling claims of academic dishonesty in this way, faculty demonstrated to students that each student and each case is handled similarly and one does not have an advantage over another. Through support and consistency, a positive environment of academic integrity is achieved. This finding supports the findings of McCabe (1993) that both the faculty and the students share the responsibility to

maintain a positive environment. Students also acknowledged faculty provide positive test-taking conditions, through proctoring and exam development that promote integrity and reduce the likelihood of cheating.

Mixed results related to neutralization were found in this study. Age was found to be weakly correlated to the likelihood to neutralize cheating behaviors. Similar to Birks et al. (2017), younger students were more likely to neutralize cheating behaviors compared to older students. This finding indicates that younger students were more likely to neutralize their behaviors and diminish any feelings of guilt. The current study supports the previous finding of Keçeci et al. (2011) that nursing students need ample resources and discussion of academic integrity expectations. Ultimately, the goal is to eradicate violations of academic integrity in the classroom. The results of the multiple regression found that that the course syllabus and faculty over and above predicted neutralization. Findings indicated that as students had positive perceptions of these areas, and higher levels of perceived faculty response to cheating, and were older, that neutralization decreased. This indicates that at minimum, faculty should continue addressing academic integrity, but also explore new methods to discuss, deter, and enforce violations of integrity.

There was not a correlation found between the year in the program and neutralizing academic misconduct. It was anticipated that students further in the program would be less tolerant of dishonest behaviors since those further along in a program are typically older. Past research has provided conflicting finings when examining the year in the program and engagement in dishonest behaviors. Both Bultas et al. (2017) and Hart and Morgan (2010) found that students in an accelerated, or second-degree program or RN-BSN student were less tolerant of those students who chose to engage in academically dishonest behaviors. In contrast, Oran et

al. (2016) and Keçeci et al. (2011) found that those more advanced in the program were more likely to engage in dishonest behaviors. The level of conflicting evidence demonstrates a need for further exploration. However, as noted above, establishing a foundation of academic integrity expectations might mitigate the possibility of students more advanced in the program engaging in dishonest behaviors.

How students receive academic integrity policy information is important to consider. Course syllabus, campus website, first-year orientation, program counselors, faculty, deans and other administrators, and other students were all found to be significant predictors of student perceptions of faculty support of academic integrity policies. However, investing more time continue to develop student handbooks and education for advisors is needed. Investing in ways to improve these sources will add another avenue for students to receive information.

Creating a culture of integrity is also critical for nursing educators. As the participants noted in this study, implementing an honor code could improve the overall integrity within a program. More education and communication were also desired by students to improve overall understanding of academic integrity expectations. Finally, implementing consistent and fair repercussions for anyone found in violation of the academic integrity policies could strengthen the overall culture within a program. Consistent and fair repercussions might provide students with the sense of a less punitive environment. When faculty openly communicate expectations to the entire class, more students are willing to report observed peer violations. The findings tie to perceptions of severity because when a student better understands what is considered a severe offense, they are also more likely to report violations. All of these factors, when implemented and executed together, promote a trusting environment that supports integrity in the classroom.

Limitations

The time frame of the study was the primary noted limitation of the study. The study was conducted during the global COVID-19 pandemic making reaching willing participants more difficult. Students were already engrossed in a shift to online learning, which was considered vastly different than the traditional classroom delivery. Many students were possibly overwhelmed with this academic shift in addition to other personal and financial obligations. This stress is the primary reason the original pre-test/post-test experimental design was shifted to a cross-sectional, correlational study. With the shift of the study design, more participants were reached, however, there was a financial barrier with the number of available $10 Amazon gift cards. If there had not been this barrier, far more participants could have been reached. The collaborative team found that the day the survey opened that there were over 1000 surveys in progress, but funds were only available for approximately 450 students. Therefore, the survey was closed at that time, with 446 completed surveys. There is a potential concern that students completed the survey only to receive a gift card. To control for this factor, any survey taken in less than five minutes was excluded from data analysis.

Another noted limitation is the MAIS-MNS. This instrument was modified from the original version to apply to nursing students and nursing education. There is a lack of concurrent validity as there is no comparison of results from the modified survey at this time. Future studies should be conducted using this instrument to assist in establishing concurrent validity.

The 21-item knowledge assessment was developed by the three collaborators for this particular study. While the KR-20 score was above the acceptable reliability coefficient of an instructor-made test, more testing is needed to establish the long-term validity of the assessment.

Six of the questions had a weak PBI and need to be revised if implemented again. Distractors should also be examined for these questions.

The sensitivity of the topic is also of concern and a noted limitation. Students were not asked to identify if they had personally engaged in any type of dishonest behavior, however, they were asked about their perceptions of different topics. While it was explained in the informed consent that all surveys were anonymous, students may still have feared their responses would not remain anonymous. This could have potentially swayed their response to what they felt was the correct answer the researchers wanted to discover.

Directions for Future Research

Continued research is needed to examine student perceptions of faculty support of academic integrity in nursing programs. One direction that would be important is to utilize the components of the original study design on a larger scale. An online module teaching intervention may increase pre-licensure undergraduate nursing student awareness of academic integrity. This includes the concepts of what constitutes violations in integrity, how faculty play a role in establishing an environment of integrity, and how questionable integrity activities can be avoided. Currently, there is little evidence to support the use of an online module exposing nursing students to principles of academic integrity. Moreover, only a few studies have determined if an online intervention has an impact on student knowledge related to academic integrity. In the developed Academic Integrity Module (AIM) – Nursing course, which was developed for the original study design, students would be exposed to the concepts of faculty support related to academic integrity, willingness to report peer violations, and severity of academic integrity violations. This module provides written information as well as vignettes for students to view and reflect upon. An experimental design would allow researchers and nursing

educators to determine the best way to deliver and enforce academic integrity policies fostering the values of trustworthiness and honesty in nursing programs and future clinical practice.

Another avenue for future research would be exploring neutralizing behaviors of undergraduate nursing programs. Previous research identified as nursing students progressed they were more likely to engage in dishonest behaviors. However, these findings were not supported in this study. It is important to better understand if particular age groups or if placement in a nursing program contributes to the likelihood of a student engaging in academically dishonest behaviors and their willingness to report peer violations.

When students recognize that their actions carry consequences, not only for them academically, but possibly for their patients as well, a higher level of integrity should be valued and upheld (Bultas et al., 2017). This value, when established in nursing school is likely to carry forward to professional practice. Academic integrity will continue to remain a relevant topic in nursing education. While it is the student's responsibility to ensure personal integrity, the faculty also play a dynamic role. Faculty assist in fostering an environment conducive to the values of trustworthiness and honesty in the classroom, laboratory, and clinical settings. Faculty should therefore incorporate methods to address academic integrity throughout each course and the program, thus demonstrating to students the importance of integrity in the classroom and ultimately clinical practice.

Chapter V References

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Appendix A

IRB Approval

Attachments:
- AI_Informed Consent_NSNA_Final.pdf
- Exemption Notification - IRB ID: 21-109.pdf

TEACHERS COLLEGE
COLUMBIA UNIVERSITY

Teachers College IRB *Exempt Study Approval*

To: Shannon Stevenson, Kathryn Flannigan, and Amanda Willey
From: Myra Luna Lucero, Research Compliance Director
Subject: IRB Approval: 21-109 Protocol
Date: 12/11/2020

Thank you for submitting your study entitled, "*Exploring Nursing Students' Knowledge and Attitudes Regarding Academic Integrity* ;" the IRB has determined that your study is **Exempt** from committee review (Category **2**) on 12/11/2020.

Due to COVID-19 quarantine, all in-person study activities with human subjects are suspended. Following guidance from New York State and Teachers College, the Institutional Review Board will announce when in-person research can resume and what steps to take at that time.

Please keep in mind that the IRB Committee must be contacted if there are any changes to your research protocol. The number assigned to your protocol is **21-109**. Feel free to contact the IRB Office by using the "Messages" option in the electronic Mentor IRB system if you have any questions about this protocol.

Please note that your Consent form bears an official IRB authorization stamp and is attached to this email. Copies of this form with the IRB stamp must be used for your research work. Further, all research recruitment materials must include the study's IRB-approved protocol number.

As the PI of record for this protocol, you are required to:

- Use current, up-to-date IRB approved documents
- Ensure all study staff and their CITI certifications are on record with the IRB
- Notify the IRB of any changes or modifications to your study procedures
- Alert the IRB of any adverse events

You are also required to respond if the IRB communicates with you directly about any aspect of your protocol. Failure to adhere to your responsibilities as a study PI can result in action by the IRB up to and including suspension of your approval and cessation of your research.

You can retrieve a PDF copy of this approval letter from Mentor IRB.

Best wishes for your research work.

Sincerely,
Dr. Myra Luna Lucero
Research Compliance Director
IRB@tc.edu

Appendix B

Informed Consent

Protocol Title: Exploring Nursing Students' Knowledge and Attitudes towards Academic Integrity
Principal Investigators: Kathryn Flannigan, MSN, RN; Shannon Stevenson, MSN, RNC-OB, CNE; Amanda Willey, MSN, RN, CCHP

INTRODUCTION

You are being invited to participate in this online research study called "Exploring Nursing Students' Knowledge and Attitudes towards Academic Integrity". You may qualify to take part in this research study if you are (1) over 18 years of age and (2) enrolled in an undergraduate pre-licensure baccalaureate nursing (BSN) program.

You will be among nursing students from various universities who are asked about academic integrity in nursing school. It will take approximately 35-40 minutes of your time to complete the online survey.

WHY IS THIS STUDY BEING DONE?

The purpose of this study is to gather information from nursing students regarding your experiences with and perceptions of academic integrity.

WHAT WILL I BE ASKED TO DO IF I AGREE TO TAKE PART IN THIS STUDY?

If you decide to participate, you will accept the consent form online by clicking on "I agree to participate" below. You will then be redirected to an online survey in Qualtrics. Qualtrics is an online survey tool. Your responses will be kept confidential. Respondents who complete the survey and choose to provide their email address will be sent a $10 Amazon gift card. No one besides the researchers will have access to your email address and it will not be connected to your survey responses. Email addresses will only be utilized to send the Amazon gift card after survey completion.

WHAT POSSIBLE RISKS OR DISCOMFORTS CAN I EXPECT FROM TAKING PART IN THIS STUDY?

This is a minimal risk study, which means the harms or discomforts that you may experience are not greater than you would ordinarily encounter in daily life while taking routine psychological examinations or tests. The principal investigators will take precautions to keep your information confidential and prevent anyone from discovering or guessing your identity. Your survey responses will be confidential and not associated with your email address if you choose to provide it to qualify for a gift card. Should you feel any stress or discomfort reflecting on your experiences with academic integrity, you may leave the study at any time by exiting the survey or closing your internet browser. Please note that you will not be eligible for a gift card if you choose to exit the survey prior to completing it.

WHAT POSSIBLE BENEFITS CAN I EXPECT FROM TAKING PART IN THIS STUDY?

There is no direct benefit to you for participating in this study. Taking part in this study is voluntary. You may choose not to take part or may leave the study at any time. Leaving the study will not result in any penalty. Participation may make a contribution to a better understanding of academic integrity for nursing students and faculty.

WILL I BE PAID FOR BEING IN THIS STUDY?

At the end of the survey, you will have the option to enter your email address for a $10 gift card to Amazon. Your email address and survey responses will be stored separately. You must complete the survey to receive the gift card. The gift card will be sent via email approximately 1-2 weeks after survey completion.

WHEN IS THE STUDY OVER? CAN I LEAVE THE STUDY BEFORE IT ENDS?

The study is over when you have completed the Qualtrics survey questionnaire. However, you can leave the study at any time even if you haven't finished. If you choose to leave the study before submitting the survey, you are not eligible for the gift card.

PROTECTION OF YOUR CONFIDENTIALITY

Any electronic or digital information will be stored on a computer that is password protected by the Principal Investigators.

For quality assurance, the study team and/or members of the Teachers College Institutional Review Board (IRB) may review the data collected from you as part of this study. Otherwise, all information obtained from your participation in this study will be held strictly confidential and will be disclosed only with your permission or as required by U.S. or State law

HOW WILL THE RESULTS BE USED?

The results of this study will be presented at each investigator's dissertation defense, academic conferences, and published in journals. Identifiers will be removed from the data. De-identifiable data may be used for future research studies or distributed to another investigator for future research without additional informed consent from the subject or the representative.

WHO CAN ANSWER MY QUESTIONS ABOUT THIS STUDY?

If you have any questions about taking part in this research study, you may contact one of the Principal Investigators: Shannon Stevenson, MSN, RNC-OB, CNE at slm2230@tc.columbia.edu.

If you have questions or concerns about your rights as a research subject, you should contact the Institutional Review Board (IRB) (the human research ethics committee) at 212-678-4105 or email IRB@tc.edu. Or you can write to the IRB at Teachers College, Columbia University, 525 W. 120th Street, New York, NY 1002. The IRB is the committee that oversees human research protection for Teachers College, Columbia University.

PARTICIPANT'S RIGHTS

- I have read the informed consent. I have had ample opportunity to ask questions about the purposes, procedures, risks and benefits regarding this research study.

- I understand that my participation is voluntary. I may refuse to participate or withdraw participation at any time without penalty.
- I understand that this study is not associated with any particular course and I will not receive course credit nor penalty should I choose to participate or not.
- The researchers may withdraw me from the research at their professional discretion (Conditions for withdrawal can include lack of participation in completing survey).
- If during the course of the study, significant new information that has been developed becomes available which may relate to my willingness to continue my participation, the investigator will provide this information to me.
- Any information derived from the research study that personally identifies me will not be voluntarily released or disclosed without my separate consent, except as specifically required by law.
- De-identifiable data may be used for future research studies or distributed to another investigator for future research without additional informed consent from the subject or the representative.
- I should receive a copy of the Informed Consent document.

Consent Checkbox:

Please click "I agree to participate in this study" if you consent to participate in this study.

Appendix C

McCabe's Original Survey

McCabe's Original Instrument

Please tell us about the academic environment at *Generic University*.

How would you rate...

	Very Low	Low	Medium	High	Very High
the severity of penalties for cheating at Generic University?	○	○	○	○	○
the average student's understanding of campus policies concerning student cheating?	○	○	○	○	○
the faculty's understanding of these policies?	○	○	○	○	○
student support of these policies?	○	○	○	○	○
faculty support of these policies?	○	○	○	○	○
the effectiveness of these policies?	○	○	○	○	○

Have you been informed about the academic integrity or cheating policies at *Generic University*?

Yes	No

Please respond to the following statements.

	Yes	No
Before you came to Generic University, were you aware that the school had an honor code?	○	○
Did the fact that Generic University has an honor code impact your decision to attend?	○	○

To what extent do you have a clear understanding of *Generic University's* policies regarding academic honesty?

Not at all	A little	Average	A lot	Greatly

In the past year, how often, on average, did your instructors discuss policies concerning:

	Never	Very seldom	Seldom/Sometimes	Often	Very Often
Plagiarism	○	○	○	○	○
Guidelines on group work or collaboration	○	○	○	○	○
Proper citation/referencing of written sources	○	○	○	○	○
Proper citation/referencing of Internet sources	○	○	○	○	○
Falsifying/fabricating course lab data	○	○	○	○	○
Falsifying/fabricating research data	○	○	○	○	○

How frequently do you think the following occurred at your secondary school/high school?

	Never	Very seldom	Seldom/Sometimes	Often	Very Often
Plagiarism on written assignments.	○	○	○	○	○
Inappropriately sharing work in group assignments.	○	○	○	○	○
Cheating during tests or examinations.	○	○	○	○	○
Submitting the same paper in more than one course without specific permission.	○	○	○	○	○
Purchasing papers.	○	○	○	○	○
Use of electronic/digital devices as an unauthorized aid during an in-class test.	○	○	○	○	○
Falsifying information on an exam or paper after it has been graded/submitted.	○	○	○	○	○

How frequently do you think the following occur at *Generic University*?

	Never	Very seldom	Seldom/Sometimes	Often	Very Often
Plagiarism on written assignments.	○	○	○	○	○
Inappropriately sharing work in group assignments.	○	○	○	○	○

Cheating during tests or examinations.	○	○	○	○	○
Submitting the same paper in more than one course without specific permission.	○	○	○	○	○
Purchasing papers.	○	○	○	○	○
Use of electronic/digital devices as an unauthorized aid during an in-class test.	○	○	○	○	○
Falsifying information on an exam or paper after it has been graded/submitted.	○	○	○	○	○

How often, if ever, have you seen another student cheat during a test or examination at your secondary school/high school?

Never	Once	A few times	Several times	Many times

How often, if ever, have you seen another student cheat during a test or examination at *Generic University*?

Never	Once	A few times	Several times	Many times

Have you ever reported another student for cheating?

Yes	No

The International Center for Academic Integrity

This section asks you some questions about specific behaviors that some people might consider cheating. Please remember that this survey is completely anonymous and there is no way that anyone can connect you with any of your answers.

In the RED column please mark how often, if ever, in the past year you have engaged in any of the following behaviors. If a question does not apply to any of the courses you took in the last year, please check the 'Not Relevant' column. For example, if you had no tests/exams in the last year, you would check 'Not Relevant' for questions related to tests/exams.

In the BLUE column please mark how serious you think each type of behavior is.

	How often have you engaged in the behavior?				How serious is the behavior?			
	Never	Once	More than once	Not relevant	Not Cheating	Trivial Cheating	Moderate Cheating	Serious Cheating
Fabricating or falsifying a bibliography.	○	○	○	○	○	○	○	○
Working on an assignment with others (in person) when the instructor asked for individual work.	○	○	○	○	○	○	○	○
Working on an assignment with others (using electronic means) when the instructor asked for individual work.	○	○	○	○	○	○	○	○
Getting questions or answers from someone who has already taken a test.	○	○	○	○	○	○	○	○
In a course requiring computer work, copying another student's program rather than writing your own.	○	○	○	○	○	○	○	○
Helping someone else cheat on a test.	○	○	○	○	○	○	○	○
Fabricating or falsifying lab data.	○	○	○	○	○	○	○	○
Fabricating or falsifying research data.	○	○	○	○	○	○	○	○

	Never	Once	More than once	Not relevant	Not Cheating	Trivial Cheating	Moderate Cheating	Serious Cheating
Copying from another student during a test **with** his or her knowledge.	○	○	○	○	○	○	○	○
Copying from another student during a test or examination **without** his or her knowledge	○	○	○	○	○	○	○	○
Using digital technology (such as text messaging) to get unpermitted help from someone during a test or examination.	○	○	○	○	○	○	○	○
Receiving unpermitted help on an assignment.	○	○	○	○	○	○	○	○
Copying (by hand or in person) another student's homework.	○	○	○	○	○	○	○	○
Copying (using electronic means) another student's homework.	○	○	○	○	○	○	○	○
Paraphrasing or copying a few sentences from a book, magazine, or journal (not electronic or Web-based) without footnoting them in a paper you submitted.	○	○	○	○	○	○	○	○
Turning in a paper written and previously submitted by another student and claiming it as your own work.	○	○	○	○	○	○	○	○

	Never	Once	More than once	Not relevant	Not Cheating	Trivial Cheating	Moderate Cheating	Serious Cheating
Paraphrasing or copying a few sentences of material from an electronic source (e.g. the internet) without footnoting them in a paper you submitted.	○	○	○	○	○	○	○	○
Turning in a paper you purchased or obtained from a Web site (such as schoolsucks.com) and claimed it as your own work.	○	○	○	○	○	○	○	○
Using unpermitted handwritten crib notes (or cheat sheets) during a test or exam.	○	○	○	○	○	○	○	○
Using electronic crib notes (stored in tablet, phone, or other device) to cheat on a test or exam.	○	○	○	○	○	○	○	○
Using an electronic/digital device as an unauthorized aid during an exam.	○	○	○	○	○	○	○	○
Copying material, almost word for word, from any written source and turning it in as your own work.	○	○	○	○	○	○	○	○
Turning in a paper copied, at least in part, from another student's paper, whether or not the student is currently taking the same course.	○	○	○	○	○	○	○	○
Using a false or forged excuse to obtain an extension on a due date or delay taking an exam.	○	○	○	○	○	○	○	○

	Never	Once	More than once	Not relevant	Not Cheating	Trivial Cheating	Moderate Cheating	Serious Cheating
Turning in work done by someone else.	○	○	○	○	○	○	○	○
Receiving requests from another person (in person or using electronic means) to copy your homework.	○	○	○	○	○	○	○	○
Submitting the same paper in more than one course without specific permission	○	○	○	○	○	○	○	○
Using Cliff Notes or Spark Notes and not citing.	○	○	○	○	○	○	○	○
Using a drug such as Adderall (without a prescription) to aid in studying/taking an exam.	○	○	○	○	○	○	○	○
Cheating on a test in any other way.	○	○	○	○	○	○	○	○

>>

Since you indicated that you have paraphrased or copied material from a written or electronic source without citing it, indicate below how you accessed this material (select all that apply):

- Internet or other electronic means only
- Have only used hard (paper) copies of sources
- Have primarily used Internet or other electronic means
- Have primarily used hard (paper) copies of sources
- Have used both methods pretty equally

Have you ever taken an online test or exam at *Generic University*?

Yes	No

>>

This survey is sponsored by the International Center for Academic Integrity and administered by Dr. David Rettinger, a professor at the University of Mary Washington, Fredericksburg, VA.

How likely is it that:

	Very unlikely	Unlikely	Likely	Very Likely
You would report an incident of cheating that you observed?	○	○	○	○
The typical student at Generic University would report such violations?	○	○	○	○
A student would report a close friend?	○	○	○	○

How strongly do you agree or disagree with the following statements?

	Strongly agree	Somewhat agree	Neither agree nor disagree	Somewhat disagree	Strongly disagree	Not Sure
Cheating is a serious problem at my school.	○	○	○	○	○	○
The investigation of suspected incidents of cheating is fair and impartial at my school.	○	○	○	○	○	○
Students should be held responsible for monitoring the academic integrity of other students.	○	○	○	○	○	○
Faculty members are vigilant in discovering and reporting suspected cases of academic dishonesty.	○	○	○	○	○	○
Faculty members change exams and assignments on a regular basis.	○	○	○	○	○	○
The amount of course work I'm expected to complete is reasonable for my year level and program.	○	○	○	○	○	○
The degree of difficulty in my exams and assignments is appropriate for my year level and program.	○	○	○	○	○	○
The types of assessment used in my courses are effective at evaluating my level of understanding of course concepts.	○	○	○	○	○	○
The types of assessment used in my courses are effective at helping me learn course concepts.	○	○	○	○	○	○

If you had cheated in a course and the following individuals knew about it, what would their reaction be?

	Very Strongly Disapprove	Fairly Strongly Disapprove	Disapprove	Neither Approve nor Disapprove	Approve	Strongly Approve	Very Strongly Approve
A close friend	○	○	○	○	○	○	○
A casual acquaintance or classmate	○	○	○	○	○	○	○
Your parents	○	○	○	○	○	○	○

What do you see as successful strategies toward combating academic dishonesty on campus (check all that apply)?

- Institution of an honor code.
- Better education regarding academic dishonesty in a First Year program.
- Better education regarding academic dishonesty in the departments/programs.
- Harsher sanctions for academic dishonesty violations.
- Use of Turnitin.com or other software designed to detect plagiarism.

>>

This survey is sponsored by the International Center for Academic Integrity and administered by Dr. David Rettinger, a professor at the University of Mary Washington, Fredericksburg, VA.

What is your academic class standing?

1st year undergraduate (Freshman)	3rd year MA
2nd year undergraduate (Sophomore)	1st year Ph.D.
3rd year undergraduate (Junior)	2nd year Ph.D.
4th year undergraduate (Senior)	3rd year Ph.D.
More than 4 years undergraduate	Ph.D. Candidate
1st year MA	Non-degree seeking
2nd year MA	Continuing Education

What is your declared or intended academic concentration? (choose as many as apply)

Insert here

What is your gender?

Male	Female	Trans or other gender identity

How old are you?

- Under 18
- 18 - 24
- 25 - 39
- 40 or older

Are you a U. S. citizen or long term resident?

- Yes
- No

Was your main high school/secondary school located in the United States?

- Yes, in the U. S.
- No, in another country.

Are you a part time or full time student this semester?

- Part time
- Full time

What is your marital status?

- Married
- Widowed
- Divorced
- Separated
- Never married

What is your current living situation?

- Campus Dorm/Residence Hall/Apartment
- Apartment - alone or with roommates
- Home - alone or with roommates
- Home - with parents

What is your approximate cumulative grade point average (GPA) at Generic University?

0 0.5 1 1.5 2 2.5 3 3.5 4

If you actively participate in any of the following, please tell us about how much time you spend on each activity in an average week.

	Do not participate	1-10 hours	11-20 hours	21-30 hours	31-40 hours	40 or more hours
Paid employment	○	○	○	○	○	○
Caring for a dependent or family member	○	○	○	○	○	○
Social fraternity/sorority/club	○	○	○	○	○	○
Athletics	○	○	○	○	○	○
Academic Club or group	○	○	○	○	○	○
Student Government	○	○	○	○	○	○
Non-athletic organization that regularly travels (Model UN, Debate, etc.)	○	○	○	○	○	○
Other	○	○	○	○	○	○

>>

This survey is sponsored by the International Center for Academic Integrity and administered by Dr. David Rettinger, a professor at the University of Mary Washington, Fredericksburg, VA.

What specific changes would you like to see *Generic University* take in support of academic integrity? What role should students play in this process?

Please use this space for any comments you care to make, or if there is anything else you would like to tell us about the topic of cheating.

>>

This survey is sponsored by the International Center for Academic Integrity and administered by Dr. David Rettinger, a professor at the University of Mary Washington, Fredericksburg, VA.

We thank you for your time spent taking this survey.
Your response has been recorded.

This survey is sponsored by the International Center for Academic Integrity and administered by Dr. David Rettinger, a professor at the University of Mary Washington, Fredericksburg, VA.

Appendix D

Permission to Modify McCabe's Academic Integrity Survey

On Wed, Mar 27, 2019 at 3:15 PM David Rettinger <drettinger@academicintegrity.org> wrote:
Amanda,

Thanks for your interest in our surveys. Here is a pair of links for the surveys that Don McCabe used in his research. You would be welcome to use them in your research. Data from them was published by McCabe over a number of years, summarized in his 2012 book, *Cheating in College*. Please cite the relevant part of it if you use any of the scales. His original papers contain validation and methodological information for the various scales to a greater or lesser degree.

We're in the process of creating some new materials to follow up on this work. They're not ready yet, but should be available in the next year or so for piloting.

Please let me know if I can be of further help.

https://umw.co1.qualtrics.com/jfe/preview/SV_bkAuJdlj5q1NUHz?Q_SurveyVersionID=current&Q_CHL=preview - Student
https://umw.co1.qualtrics.com/jfe/preview/SV_9NdzZhjsQSvzFA1?Q_SurveyVersionID=current&Q_CHL=preview - Faculty

Best,

DR
--
David Rettinger
President
International Center for Academic Integrity

Associate Professor of Psychological Science
University of Mary Washington

On Jun 4, 2019, 11:01 AM -0700, Willey, Amanda <ajw2198@tc.columbia.edu>, wrote:
Good afternoon,
I am following up regarding the use of this scale for use in our dissertation. There are pieces of the scale that are not relevant to our study, such as information about high school. We also do not want to ask personal questions about dishonest behaviors, just about the behaviors in general. Are we able to remove those aspects of the scale when using it? We do realize this will impact the reliability and validity, however, we feel removing this information would benefit our study overall.
I look forward to hearing from you.
Thank you,
Amanda

From: **David Rettinger** <drettinger@academicintegrity.org>
Date: Tue, Jun 4, 2019 at 14:15
Subject: Re: Fwd: New Message From International Center for Academic Integrity - Contact us
To: Willey, Amanda <ajw2198@tc.columbia.edu>

That's fine. Please cite McCabe appropriately, of course. Data from the scales are published, so the scales themselves should also be available for research use.

DR
--
David A. Rettinger, Ph.D.
Associate Professor of Psychology
Director of Academic Integrity Programs
University of Mary Washington

From: "Willey, Amanda" <ajw2198@tc.columbia.edu>
Date: Wednesday, October 23, 2019 at 11:21 AM
To: David Rettinger <drettinger@academicintegrity.org>
Subject: additional questions on Academic Integrity Survey

Good morning Dr. Rettinger,

We have spoken previously regarding the use of McCabes' Academic Integrity Survey and my peers and I have a follow up question as we move forward with our research. I have read Mr. McCabes' book Cheating in College and still have questions related to the psychometric properties of his original survey. Would you be able to provide the CVI and Alpha Reliability? Or be able to point us in the direction of an article where these are published? We are having difficulty locating this information. Thank you again for all your assistance in this matter.

Amanda Willey

From: **David Rettinger** <drettinger@academicintegrity.org>
Date: Wed, Oct 23, 2019 at 11:35
Subject: Re: additional questions on Academic Integrity Survey
To: Willey, Amanda <ajw2198@tc.columbia.edu>

Amanda,

Believe it or not, I can't really point you to those data. To my knowledge, that level of scale validation was never conducted. The scales were first reported in McCabe and Trevino, 1993, and you can see that the details are somewhat sparse.

As a result, a team of us are in the process of pre-testing a revised version of the McCabe survey that updates the main behavior scale and replaces a number of the ancillary scales with more theoretically relevant items. There's also a campus climate instrument as well.

We're planning on having a version of the new survey ready for use in Fall 2020, but if you're interested in participating in the validation study, we'd be happy to include

participants from Columbia and/or Salisbury. Naturally, we'd provide a report on the school-level findings with the caveat that the study is still in the validation and revision stages.

This is probably not the answer you were expecting, but I hope you find it useful.

Best,

DR

--

David Rettinger

Appendix E

McCabe's Academic Integrity Survey-Modified for Nursing Students (MAIS-MNS)

Start of Block: Please tell us about the academic environment at your university.

Q1 In which region of the United States is your nursing program located?

- ○ Northwest (1)
- ○ Southeast (2)
- ○ Midwest (3)
- ○ Southwest (4)
- ○ West (5)

Q2 How would you rate:

	Very Low (1)	Low (2)	Medium (3)	High (4)	Very High (5)
The severity of penalties for violating academic integrity at your university (1)	○	○	○	○	○
The average student's understanding of campus policies related to academic integrity. (2)	○	○	○	○	○
The faculty's understanding of these policies (3)	○	○	○	○	○
Student support of these policies (4)	○	○	○	○	○
Faculty support of these policies (5)	○	○	○	○	○

The effectiveness of these policies (6)	○	○	○	○	○
Faculty enforcement of these policies (7)	○	○	○	○	○
Faculty ability to recognize issues with academic integrity (8)	○	○	○	○	○

Q3 How informed do you feel about the academic integrity or cheating policies at your university?

- ☐ Not at all (1)
- ☐ Somewhat (2)
- ☐ Neutral (3)
- ☐ A lot (4)
- ☐ A great deal (5)

Q4 Where and how much have you learned about these policies?

	Learned Nothing (1)	Learned a Little (2)	Learned Some (3)	Learned a Lot (7)
First-year orientation program (1)	○	○	○	○
Campus website (2)	○	○	○	○
Student Handbook (3)	○	○	○	○

Program Counselor (4)	○	○	○	○
Residential Advisor (10)	○	○	○	○
Advisor (11)	○	○	○	○
Faculty (8)	○	○	○	○
Other students (5)	○	○	○	○
Dean or other administrator (7)	○	○	○	○
Course Syllabus (13)	○	○	○	○

Q5 To what extent do you have a clear understanding of your university's policies regarding academic honesty?

- ○ Not a lot (1)
- ○ A little (2)
- ○ Average (3)
- ○ A lot (4)
- ○ Greatly (5)

Q6 To what extent do you agree with the following statements? Cheating is okay when:

	Strongly Disagree (1)	Disagree (2)	Neutral (3)	Agree (4)	Strongly Agree (5)
It does not impact anyone else. (1)	○	○	○	○	○
Faculty do not prepare you for an exam/assignment. (2)	○	○	○	○	○

Students are not aware of the academic policies. (3)	○	○	○	○	○
Students want to make their parents proud. (4)	○	○	○	○	○
Students want to help their peers be successful. (5)	○	○	○	○	○
It does not compromise patient safety. (6)	○	○	○	○	○
I am not the only student cheating. (7)	○	○	○	○	○

Page Break

Q7 In the past year, how often, on average, did faculty discuss policies concerning:

	Never (1)	Rarely (2)	Sometimes (3)	Often (4)	Very Often (5)
Plagiarism (1)	○	○	○	○	○
Guidelines on group work or collaboration (2)	○	○	○	○	○
Proper citation/referencing of written or Internet sources (3)	○	○	○	○	○
Falsifying data in a course lab (i.e. Health Assessment lab) (4)	○	○	○	○	○
Falsifying clinical data (i.e. vital signs, assessments, medication administration, etc.) (5)	○	○	○	○	○
Policies related to Academic Integrity	○	○	○	○	○

at the beginning of an in-person or face-to-face class (6)					
Provided information in the syllabus regarding academic integrity (7)					
Using parts of a care plan from a previous care plan to save time (10)					
Using parts of a care plan from a classmate to save time (11)					
Giving a heads up to a classmate about an upcoming check off (12)					
Discussing patient information outside of the conference room (13)					
Discussing patient information in common areas (14)					

Q8 How frequently do you think the following occur in your nursing program?

	Never (1)	Rarely (2)	Sometimes (3)	Often (4)	Very Often (5)
Plagiarism on written assignments (1)					
Inappropriately sharing work in group assignments (2)					

Cheating during tests or examinations (3)	○	○	○	○	○
Falsifying clinical data (i.e. vital signs, assessments, medication administration, etc.) (5)	○	○	○	○	○
Falsifying data in a course lab (i.e. Health Assessment lab) (4)	○	○	○	○	○

Page Break

Q9 How often, if ever, have you been aware of another student violating academic integrity during your nursing program?

	Never (1)	Once (2)	A Few Times (3)	Several Times (4)	Many Times (5)
On a test (1)	○	○	○	○	○
On a quiz (2)	○	○	○	○	○
On a class assignment (3)	○	○	○	○	○
In the clinical setting (4)	○	○	○	○	○
In the simulation setting (5)	○	○	○	○	○
In the laboratory setting (6)	○	○	○	○	○

Q10 Have you ever reported another nursing student for violating academic integrity?

○ Yes (1)

○ No (2)

Q11 How likely is it that:

	Very unlikely (1)	Unlikely (2)	Likely (3)	Very likely (4)
You would report cheating that you observed during a test? (1)	○	○	○	○
You would report cheating that you observed during a classroom activity other than a test? (5)	○	○	○	○
You would report an incident of cheating that you observed in the clinical setting that you think could cause patient harm? (4)	○	○	○	○
You would report an incident of cheating that you observed in the clinical setting that you do not think could cause patient harm? (10)	○	○	○	○
You would report someone for cheating in the simulation setting? (14)	○	○	○	○
You would report someone for cheating in the laboratory setting? (13)	○	○	○	○
You would report someone for	○	○	○	○

cheating on an online exam? (15)				
You would report someone for cheating on an online assignment? (16)	○	○	○	○
You would report cheating on a quiz if everyone seemed to be doing it? (7)	○	○	○	○
You would report cheating on an assignment that was worth few points towards your total grade? (8)	○	○	○	○
You would report cheating on an assignment that was worth many points towards your total grade? (9)	○	○	○	○
The typical student in your nursing program would report such violations? (2)	○	○	○	○
The typical student in your nursing program student would report a close friend for cheating? (3)	○	○	○	○
You would report someone for cheating if you knew the person? (6)	○	○	○	○
You would report someone for	○	○	○	○

cheating if you did not know the person? (11)					
You would report someone for cheating if you lived with them? (12)					

Q12 To what extent do you agree with the following statements: "I would NOT report a peer for violating academic integrity because I worry..."

	Strongly Disagree (1)	Disagree (2)	Neither Agree Nor Disagree (3)	Agree (4)	Strongly Agree (13)
They would be harshly punished (1)					
They would try to retaliate against me (2)					
I would get a negative reputation by reporting them (3)					
I would lose friends for reporting other nursing students (4)					
My report would be ignored by faculty (5)					

Page Break

Q13 How do you perceive the following behaviors?

	Not Cheating (1)	Trivial Cheating (2)	Moderate Cheating (3)	Serious Cheating (4)
Making up a reference list (1)	○	○	○	○
Working on an assignment with others when the instructor asked for individual work (2)	○	○	○	○
Using a test bank or quizlet to prepare for an exam (3)	○	○	○	○
Getting questions or answers from someone who has already taken a quiz or test (4)	○	○	○	○
In a course requiring clinical paperwork, copying another student's work (i.e. care plans) rather than writing your own (5)	○	○	○	○
Helping someone else cheat (6)	○	○	○	○
Making up data in a course lab (i.e. Health Assessment lab) (7)	○	○	○	○
Documenting vital signs on patients that were not obtained by you (8)	○	○	○	○
Collaborating with the approval of faculty members (22)	○	○	○	○
Copying from another student during a test **with** his or her knowledge (9)	○	○	○	○
Copying from another student during a test or	○	○	○	○

examination **without** his or her knowledge (10)				
Using digital technology (such as smart phones or watches, headphones, etc.) to get unpermitted help during a test or examination (11)	○	○	○	○
Receiving unpermitted help during an assignment (12)	○	○	○	○
Paraphrasing or copying a few sentences from a book or electronic resource without referencing the source (13)	○	○	○	○
Turning in work completed and previously submitted by another student and claiming it as your own (14)	○	○	○	○
Using a forged excuse to obtain an extension on a due date, delay taking an exam, or miss a clinical shift (15)	○	○	○	○
Submitting the same assignment/work in more than one course without permission (16)	○	○	○	○
Using permitted notes during a test or examination (17)	○	○	○	○
Creating your own study group with peers from another course section (18)	○	○	○	○

Taking pictures of quizzes (19)	○	○	○	○
Talking to peers in another course section about an exam you have taken, but they have not (20)	○	○	○	○
Discussing simulation cases with students who haven't participated in the simulation experience yet. (23)	○	○	○	○
Lab assistants who check off peers even when the person did not complete the skill correctly. (24)	○	○	○	○
Hiding notes out of view of the camera when scanning the room before an online test. (25)	○	○	○	○
Sharing answers to prework assignments for simulation experiences. (26)	○	○	○	○
Giving peers information to complete an assignment that you obtained from a virtual simulation experience. (27)	○	○	○	○
Paying someone to take your online exam for you. (28)	○	○	○	○
Using an outside web browser to look up answers during an online assignment/quiz/exam. (29)	○	○	○	○

Adding time that you didn't complete to your clinical hour log to meet the hour requirement. (30)	○	○	○	○
Adding dates/time to your laboratory practice log that you did not compete. (31)	○	○	○	○

Page Break

Q14 How strongly do you agree or disagree with the following statements?

	Disagree Strongly (1)	Disagree (2)	Neither Disagree or Agree (3)	Agree (4)	Agree Strongly (5)
Cheating is a serious problem in my nursing program (1)	○	○	○	○	○
The investigation of suspected incidents of violations of academic integrity is fair and impartial in my nursing program (2)	○	○	○	○	○
Students should be held responsible for monitoring the academic integrity of other students (3)	○	○	○	○	○
Faculty members are vigilant in discovering and investigating suspected cases of	○	○	○	○	○

academic dishonesty (4)					
Faculty members change exam questions or assignments on a regular basis (5)	○	○	○	○	○
Faculty members provide appropriate exam proctoring (6)	○	○	○	○	○
Faculty randomize seating during exams (7)	○	○	○	○	○
Faculty promote open communication about academic integrity (8)	○	○	○	○	○
The faculty provide adequate information regarding academic integrity in the classroom (10)	○	○	○	○	○
The faculty does not provide adequate information regarding academic integrity in the classroom (11)	○	○	○	○	○
The faculty use multiple versions of an exam (13)	○	○	○	○	○

The faculty randomize questions and answers on computerized exams (14)	○	○	○	○	○
The faculty use multiple versions of a simulation scenario (15)	○	○	○	○	○
The faculty allow students to see one question at a time with no backtracking on computerized exams (16)	○	○	○	○	○
Faculty utilize plagiarism detection software (18)	○	○	○	○	○
Faculty discuss policies related to academic integrity throughout the course (19)	○	○	○	○	○
Faculty follow the institution's academic integrity policies (20)	○	○	○	○	○
Faculty have several scenarios in the laboratory setting for check-offs or returns (21)	○	○	○	○	○
Faculty check behind students in the	○	○	○	○	○

electronic health record (22)					
Faculty have several versions of laboratory tests (23)	○	○	○	○	○

Q15 Please indicate how successful the following strategies would be at improving academic integrity in your nursing program.

	Unlikely (1)	Somewhat (2)	Likely (3)
Implementing a honor code (1)	○	○	○
Better education regarding academic integrity at the beginning of the program (2)	○	○	○
Harsher sanctions for violations of academic integrity (3)	○	○	○
Use of plagiarism-detecting software, such as Turnitin or SafeAssign (5)	○	○	○

Page Break

Q16 What is your current year in your nursing program?

- ○ Sophomore (1)
- ○ Junior (4)
- ○ Senior (6)

Q17 Are you enrolled in a traditional BSN or accelerated BSN program?

- ○ traditional (1)
- ○ accelerated (2)

Q18 Do you hold another bachelor's degree?

- ○ Yes (1)
- ○ No (3)

Q19 What is your gender?

- ○ Male (1)
- ○ Female (2)
- ○ Trans Male/Trans Man (3)
- ○ Trans Female/Trans Woman (4)
- ○ Nonbinary (5)
- ○ Different Identity (6)
- ○ Decline to respond (7)

Q20 Are you of Hispanic, Latino, or Spanish origin?

- ○ No, I am not of Hispanic, Latino, or Spanish origin (1)
- ○ Yes, I am of Mexican/Mexican American/Chican (2)
- ○ Yes, I am Puerto Rican (4)
- ○ Yes, I am Cuban (5)
- ○ Yes, I am other Hispanic, Latino, or Spanish origin (please specify) (6)

_____

Q21 Racial background. Please select all that apply.

- ☐ American Indian or Alaskan Native (1)
- ☐ Asian (2)
- ☐ Black or African American (3)
- ☐ Native Hawaiian or Other Pacific Islander (4)
- ☐ Hispanic, Latino, or Spanish origin (7)

- [ ] White (5)
- [ ] Other: Please Describe (6)

_____

Q22 What is your age?

_____

Q23 Is English your first language?

- ○ Yes (1)
- ○ No (2)

Q24 Estimate your current grade point average (GPA)

_____

Q25 What are your current living arrangements?

- ○ Live alone in a dorm, house, or apartment (1)
- ○ Live with parents (2)
- ○ Live with spouse or significant other (6)
- ○ Live in a dorm, house, or apartment with non-nursing students (3)
- ○ Live in a dorm, house, or apartment with nursing students (4)
- ○ Live in the sorority or fraternity house on campus (5)

Q26 Have you ever held any of the following professional licensures? Select all that apply.

- [ ] CNA (1)
- [ ] LPN (2)
- [ ] EMT/Paramedic (3)
- [ ] Phlebotomy (4)
- [ ] CMT (5)

☐ Another healthcare specialty such as respiratory, radiation, pharmacy, dental, etc. (6)

Appendix F

Knowledge Assessment

End of Block: Please tell us about the academic environment at your university.

Start of Block: Default Question Block

Q35
KNOWLEDGE ASSESSMENT
You have taken an online quiz and have a question about the correct answer. When emailing your instructor, you attach a screen shot of the question. This is an academic integrity violation.

- ○ True (1)
- ○ False (2)

Q36 You submit a teaching presentation that you used last year for your current class with minor modifications. Given that this is your work, it is not a violation of academic integrity.

- ○ True (1)
- ○ False (2)

Q37 Which statement is accurate when considering violations of academic integrity?

- ○ It is not considered a violation of academic integrity if you use your own work for more than one course or assignment (1)
- ○ It is acceptable to collaborate on all classwork and homework assignments because collaboration is a key aspect in providing holistic nursing care. (2)
- ○ Being unaware of what the student handbook constitutes as a violation of academic integrity does not mean you will be excused of responsibility if you commit a violation (3)
- ○ It is only a problem if you commit a violation of academic integrity willingly and on purpose (4)

Q38 Which action is not a violation of academic integrity?

- Obtaining an old copy of an exam, from a different instructor to help you study for the upcoming exam (1)
- After assessing your patients' vital signs, asking a peer in your clinical group to assess the patient's vitals them to see if they are consistent (2)
- Using a previously completed care plan to complete your nursing care plan assignment on a current patient (3)
- Discussing an exam with a peer in a different section who has not taken the exam yet (4)

Q39 You are having difficulty getting an accurate count for your patient's respirations when completing your physical assessment during clinical. For each of the last 3 shifts the patient's respirations have ranged between 16-18. What is your best action?

- Ask for assistance from your instructor (1)
- Document 16 as the respiration count (2)
- Document 18 as the respiration count (3)
- Document not applicable for this reading (4)

Q40 Which statement best defines academic integrity?

- Following the guidelines in your syllabus for each course (1)
- Promoting a culture of honesty and responsibility in your academic work (2)
- Collaborating with peers on your assignments in your courses (3)
- Providing citations in your work for all thoughts and ideas (4)

Q41 When seeing a peer document on a patient, you are aware they did not complete the assessment as documented. Which statement is true?

- ○ Your peer engaged in a violation of academic integrity. However, there is no need to be concerned about patient outcomes, as the patient is stable (1)
- ○ Your peer engaged in a violation of academic integrity. You have a concern that the patient could experience a poor outcome, as data provided was not correct (2)
- ○ Your peer did not engage in a violation of academic integrity. There is no need to be concerned about patient outcomes, as the patient is stable (3)
- ○ Your peer did not engage in a violation of academic integrity. You have a concern that the patient could experience a poor outcome, as data provided was not correct (4)

End of Block: Default Question Block

Start of Block: Block 1

Q42 Concerns about being accepted into highly competitive nursing programs is an acceptable reason nursing students engage in violations of academic integrity.

- ○ True (1)
- ○ False (2)

Q43 Many students commit academic integrity violations based on the presumption that faculty will not be able to prove they were cheating

- ○ True (1)
- ○ False (2)

Q44 Which method is a way in which faculty can best promote the academic integrity policies of the university?

- ○ Clearly communicate expectations related to academic integrity at the beginning of the semester (1)
- ○ Ask the students to review the academic integrity policies on their own (2)
- ○ Tell the students that there are academic integrity policies and these will be enforced (3)
- ○ Report any students who are suspected of cheating to the appropriate university committee (4)

Q45 A student is assigned to work with a registered nurse during a clinical rotation and the faculty will only check in on them during the clinical day. Which example would be considered a violation of academic integrity in the clinical setting? Select all that apply.

- [ ] Completing the required paperwork or care plan on a patient not assigned to the student because their information was "more interesting" (1)
- [ ] Once the clinical faculty member leaves, the student lets the primary nurse know that they were told they could leave early if no other patients arrive (2)
- [ ] Leaving the floor early and fabricating patient information to complete the required paperwork (3)
- [ ] Going to the breakroom to work on a care plan while their assigned nurse is at lunch. (4)
- [ ] Asking peers about their patients during that rotation to make the paperwork go faster (5)
- [ ] None of the above (6)
- [ ] All of the above (7)

Q46 Faculty can serve as role models through their behaviors in both the classroom and clinical settings. Which methods are ways that faculty can display this behavior? Select all that apply.

- [ ] Arriving on time for both class and clinical (1)
- [ ] Holding each student accountable for their actions based on the same standards (2)
- [ ] Providing clear expectations for the class or clinical setting throughout the course (3)
- [ ] Provide timely feedback on assignments (4)
- [ ] Create assignments that are appropriate to the course and do not require excessive time commitments to complete (5)
- [ ] None of the above (6)
- [ ] All of the above (7)

Q47 An exam is being administered by a faculty member. Which behavior by the faculty member could increase the likelihood of a student cheating?

- ○ Have multiple versions of the exam (1)
- ○ Bring in multiple proctors that walk around the room (2)
- ○ Checking the computer for new emails (3)
- ○ Have students draw a random number for seating (4)

Q48 A faculty member and student are discussing academic integrity and where to find information related to academic integrity on the campus. The faculty member directs the student to which resources? Select all that apply.

- [ ] Course syllabi (1)
- [ ] Campus policies (2)
- [ ] The student handbook (3)
- [ ] The student government association (4)
- [ ] A campus honor code (5)

End of Block: Block 1

Start of Block: Block 2

Q49 Reporting violations of academic integrity is only appropriate if the violation occurs during an examination.

- ○ True (1)
- ○ False (2)

Q50 Several states require nurses to report potential harm done to patients by themselves or other nurses.

- ○ True (1)
- ○ False (2)

Q51 In the clinical setting, a student overhears a fellow nursing student says he is going to "make up" vital signs on his assigned patient as he doesn't want to wake the patient. The student is not

sure whether or not to report the fellow nursing student and the incident. Which of the following statements is true?

- The student should tell their classmates what they heard and let them decide if it should report (1)
- The student should tell the nursing manager what they overheard the fellow nursing student say (2)
- The student should let the fellow nursing student chart what they want as the patient is stable (3)
- The student should let their clinical faculty know what was overheard (4)

Q52 Nursing students are more likely to cheat if which of the following statements is true?

- They believe their peers are also cheating (1)
- They have an understanding of their university's policies on academic integrity (2)
- They believe the odds they will be caught are high (3)
- They know that penalties for cheating at their university are high (4)

Q53 You are aware that a group of peers completed an assignment collaboratively when the instructions were to work individually. You were not involved in the group and aren't sure if you should report what you saw. Which statement is the most accurate?

- Since it is only an assignment, it's not cheating and you don't need to report it (1)
- Since you were not in the group, you don't need to report it (2)
- Since the instructions were to work individually, you do need to report it (3)
- Since the group member aren't any of your close friends, you do need to report it (4)

Q54 Which is not a reason why students hesitate to report peer violations of academic integrity?

- They are worried they will not remain anonymous (1)
- They know the consequences for the violators will be clear and fair (2)
- They assume all their peers cheat and do not want to get anyone in trouble (3)
- They do not feel they have a faculty member they can trust to report to (4)

Q55 Whose ultimate responsibility is it to review academic integrity policies to ensure understanding?

- Faculty (1)
- University officials (2)
- Lawyers for the university (3)
- Students (4)

Q57 Would you like to provide your email address for the opportunity to receive a $10 Amazon gift card?

- Yes (1)
- No (3)

End of Block: Block 2

Appendix G

Descriptive Statistics from Select Subscales of MAIS-MNS

Perceptions of Severity Subscale- Item Descriptive Statistics

How do you perceive the following behaviors?	**Not Cheating**	**Trivial Cheating**	**Moderate Cheating**	**Severe Cheating**
Fabricating a reference list.	97 (21.9%)	132 (29.9%)	131 (29.6%)	82 (18.6%)
Working on an assignment with others when the instructor asked for individual work.	38 (8.6%)	181 (41.0)	179 (40.5%)	44 (10.0%)
Using a test bank or quizlet to prepare for an exam.	268 (60.6%)	75 (17.0%)	49 (11.1%)	50 (11.3%)
Getting questions or answers from someone who has already taken a quiz or test.	6 (1.4%)	61 (13.8%)	141 (31.9%)	234 (52.9%)
In a course requiring clinical paperwork, copying another student's work (i.e. care plans) rather than writing your own.	8 (1.8%)	56 (12.7%)	136 (30.8%)	242 (54.8%)
Helping someone else cheat.	4 (0.9%)	38 (8.6%)	117 (26.5%)	283 (64.0%)
Falsifying data in a course lab (i.e. Health Assessment lab)	18 (4.1%)	108 (24.4%)	155 (35.1%)	161 (36.4%)
Documenting vital signs on patients that were not obtained by you.	34 (7.7%)	72 (16.3%)	109 (24.7%)	227 (51.4%)
Collaborating with the approval of faculty members.	368 (83.3%)	23 (5.2%)	24 (5.4%)	27 (6.1%)
Copying from another student during a test with his or her knowledge	5 (1.1%)	27 (6.1%)	110 (24.9%)	300 (67.9%)
Copying from another student during a test or examination without his or her knowledge.	2 (0.5%)	14 (3.2%)	55 (12.4%)	371 (83.9%)

Using digital technology (such as smartphones, watches, headphones, etc.) to get unpermitted help during a test or examination.	2 (0.5%)	16 (3.6%)	52 (11.8%)	372 (84.2%)
Receiving unpermitted help during an assignment or individual project.	20 (4.5%)	67 (15.2%)	135 (30.5%)	220 (49.8%)
Paraphrasing or copying a few sentences from a book or electronic resource without referencing the source.	17 (3.8%)	102 (23.1%)	170 (38.5%)	153 (34.6%)
Turning in work completed and previously submitted by another student and claiming it as your own.	4 (0.9%)	18 (4.1%)	43 (9.7%)	377 (85.3%)
Using a false or forged excuse to obtain an extension on a due date, delay taking an exam, or miss a clinical shift.	21 (4.8%)	71 (16.1%)	138 (31.2%)	212 (48.0%)
Submitting the same assignment/work in more than one course without permission.	51 (11.5%)	94 (21.3%)	147 (33.3%)	150 (33.9%)
Using permitted notes during a test or examination.	361 (81.7%)	16 (3.6%)	15 (3.4%)	50 (11.3%)
Creating your own study group with peers from another course section.	385 (87.1%)	18 (4.1%)	14 (3.2%)	25 (5.7%)
Taking pictures of quizzes.	35 (7.9%)	70 (15.8%)	121 (27.4%)	216 (48.9%)
Talking to peers in another course section about an exam or quiz that you have taken, but they have not.	54 (12.2%)	108 (24.4%)	142 (32.1%)	138 (31.2%)
Discussing simulation cases with students who haven't participated in the simulation experience yet.	69 (15.6%)	156 (35.3%)	124 (28.1%)	93 (21.0%)
Lab assistants who check off peers even when the person did not complete the skill correctly.	24 (5.4%)	74 (16.7%)	155 (35.1%)	189 (42.8%)
Hiding notes out of view of the camera with scanning the room before an online test.	4 (0.9%)	31 (7.0%)	98 (22.2%)	309 (69.9%)

Sharing answers to prework assignments for simulation experiences.	60 (13.6%)	132 (29.9%)	132 (29.9%)	118 (26.7%)
Giving peers information to complete an assignment that you obtained from a virtual simulation experience.	59 (13.3%)	121 (27.4%)	135 (30.5%)	127 (28.7%)
Paying someone to take your online exam for you.	5 (1.1%)	4 (0.9%)	23 (5.2%)	410 (92.8%)
Using an outside web browser to look up answers during an online assignment/quiz/exam.	7 (1.6%)	24 (5.4%)	70 (15.8%)	341 (77.1%)
Adding time that you didn't compete to your clinical hour log to meet the hour requirement.	11 (2.5%)	55 (12.4%)	121 (27.4%)	255 (57.7%)
Adding dates/time to your laboratory practice log that you did not complete.	9 (2.0%)	63 (14.3%)	113 (25.6%)	256 (57.9%)

Subscale Scoring Range: 30-120 Mean 89.7 Median: 91 SD: 14.41 $n = 442$

Perceived Faculty Support of Academic Integrity Policies- Item Descriptive Statistics

In the past year, how often, on average, did faculty discuss policies concerning:	**Never**	**Rarely**	**Sometimes**	**Often**	**Very Often**
Plagiarism	6 (1.4%)	44 (9.9%)	111 (25.1%)	152 (34.3%)	129 (29.1%)
Guidelines on group work or collaboration	11 (2.5%)	50 (11.3%)	106 (23.9%)	169 (38.1%)	106 (23.9%)
Proper citation/ referencing of written or internet sources	4 (0.9%)	23 (5.2%)	60 (13.5%)	145 (32.7%)	210 (47.7%)
Fabricating data in a course lab (i.e. health assessment lab)	55 (12.4%)	90 (20.3%)	94 (21.2%)	102 (23.0%)	101 (22.8%)
Fabricating clinical data (i. e. vital signs, assessments, medication administration, etc.)	54 (12.2%)	74 (16.7%)	88 (19.9%)	97 (21.9%)	129 (29.1%)
Policies related to Academic Integrity at the beginning of an in-person or face-to-face class	17 (3.8%)	35 (7.9%)	84 (19.0%)	141 (31.8%)	165 (37.2%)
Provide information in the syllabus regarding academic integrity?	3 (0.7%)	8 (1.8%)	36 (8.1%)	116 (26.2%)	278 (62.8%)
Using parts of a care plan from a previous care plan to save time	105 (23.7%)	96 (21.7%)	86 (19.4%)	87 (19.6%)	68 (15.3%)
Using parts of a care plan from a classmate to save time	115 (26.0%)	90 (20.3%)	75 (16.9%)	87 (19.6%)	75 (16.9%)
Giving a heads up to a classmate about an upcoming check off	114 (25.7%)	86 (19.4%)	71 (16.0%)	94 (21.2%)	77 (17.4%)
Discussing patient information outside of the conference room	51 (11.5%)	28 (6.3%)	52 (11.7%)	111 (25.1%)	200 (45.1%)
Discussing patient information in common areas	52 (11.7%)	26 (5.9%)	48 (10.8%)	99 (22.3%)	216 (48.8%)

Subscale Scoring Range: 12 - 60 Mean: 42.96 Median: 43 SD: 9.888 $n = 442$

Perceived Faculty Response to Cheating Subscale– Item Descriptive Statistics

How Strongly do you Agree or Disagree with the Following Statements?	**Disagree Strongly**	**Disagree**	**Neither Agree or Disagree**	**Agree**	**Agree Strongly**
Cheating is a serious problem in my nursing program	94 (21.2%)	157 (35.4%)	103 (23.3%)	51 (11.5%)	37 (8.4%)
The investigation of suspected incidents of violating academic integrity is fair and impartial in my nursing program	14 (3.2%)	23 (5.2%)	132 (29.8%)	184 (41.5%)	89 (20.1%)
Students should be held responsible for monitoring the academic integrity of other students	50 (11.3%)	98 (22.1%)	110 (24.8%)	137 (30.9%)	47 (10.6%)
Faculty members are vigilant in discovering and investigating suspected cases of academic dishonesty	12 (2.7%)	50 (11.3%)	110 (24.8%)	185 (41.8%)	85 (19.2%)
Faculty members change exam questions or assignments on a regular basis	20 (4.5%)	43 (9.7%)	127 (28.7%)	172 (38.8%)	80 (18.1%)
Faculty members provide appropriate exam proctoring	10 (2.3%)	19 (4.3%)	65 (14.7%)	193 (43.6%)	155 (35.0%)
Faculty members randomize seating during exams	50 (11.3%)	66 (14.9%)	189 (42.7%)	78 (17.6%)	59 (13.3%)
Faculty promote open communication about academic integrity	7 (1.6%)	32 (7.2%)	93 (21.0%)	170 (38.4%)	140 (31.6%)
The faculty provide adequate information	6 (1.4%)	17 (3.8%)	72 (16.3%)	175 (39.5%)	172 (38.8%)

regarding academic integrity in the classroom					
The faculty does not provide adequate information regarding academic integrity in the classroom	155 (35.0%)	152 (34.3%)	76 (17.2%)	45 (10.2%)	14 (3.2%)
The faculty use multiple versions of an exam	33 (7.4%)	66 (14.9%)	134 (30.2%)	134 (30.2%)	75 (16.9%)
The faculty randomize questions and answers on computerized exams	14 (3.2%)	23 (5.2%)	113 (25.5%)	163 (36.8%)	129 (29.1%)
The faculty use multiple versions of a simulation scenario	33 (7.4%)	57 (12.9%)	173 (39.1%)	118 (26.6%)	61 (13.8%)
The faculty allow students to see one question at a time with no backtracking on computerized exams	37 (8.4%)	60 (13.5%)	80 (18.1%)	113 (25.5%)	152 (34.3%)
Faculty utilize plagiarism detection software	12 (2.7%)	13 (2.9%)	88 (19.9%)	140 (31.6%)	189 (42.7%)
Faculty discuss policies related to academic integrity throughout the course	6 (1.4%)	37 (8.4%)	69 (15.6%)	173 (39.1%)	157 (35.4%)
Faculty follow the institution's academic integrity policies	8 (1.8%)	8 (1.8%)	51 (11.5%)	181 (40.9%)	194 (43.8%)
Faculty have several scenarios in the laboratory setting for check-offs or returns	14 (3.2%)	48 (10.8%)	141 (31.8%)	130 (29.3%)	109 (24.6%)
Faculty check behind students in the electronic health record	15 (3.4%)	38 (8.6%)	181 (40.9%)	103 (23.3%)	105 (23.7%)

Faculty have several versions of laboratory tests.	18 (4.1%)	58 (13.1%)	185 (41.8%)	95 (21.4%)	86 (19.4%)

Subscale Scoring Range: 27-73 Mean: 70.70 Median: 71 SD: 11.33 $n = 442$

Neutralization - Item Descriptive Statistics

To what extent do you agree with the following statements? Cheating is okay when:	**Strongly Disagree**	**Disagree**	**Neutral**	**Agree**	**Strongly Agree**
It does not impact anyone else	265 (59.8%)	121 (27.3)	33 (7.4%)	16 (3.6%)	7 (1.6%)
Faculty do not prepare you for an exam/assignment	222 (50.1%)	115 (26.0%)	60 (13.5%)	34 (7.7%)	11 (2.5%)
Students are not aware of the academic policies	215 (48.5%)	134 (30.2%)	64 (14.4%)	23 (5.2%)	6 (1.4%)
Students want to make their parents proud	252 (56.9%)	93 (21.0%)	32 (7.2%)	29 (6.5%)	36 (8.1%)
Students want to help their peers be successful	236 (53.3%)	98 (22.1%)	46 (10.4%)	38 (8.6%)	24 (5.4%)
It does not compromise patient safety	274 (61.9%)	97 (21.9%)	39 (8.8%)	19 (4.3%)	13 (2.9%)
I am not the only student cheating	270 (60.9%)	83 (18.7%)	47 (10.6%)	26 (5.9%)	16 (3.6%)

Subscale Scoring Range: 7-35 Mean: 12.41 Median: 10 Standard Deviation: 6. $n = 442$

Source Effectiveness Subscale- Item Descriptive Statistics

Where and how much have you learned about these policies:	**Learned Nothing**	**Learned A Little**	**Learned Some**	**Learned a Lot**
First-Year Orientation	33 (7.5%)	55 (12.4%)	139 (31.4%)	215 (48.6%)
Campus Website	83 (18.8%)	102 (23.1%)	155 (35.1%)	102 (23.1%)
Student Handbook	27 (6.1%)	41 (9.3%)	135 (30.5%)	239 (54.1%)
Program Counselor	124 (28.1%)	89 (20.1%)	132 (29.9%)	97 (21.9%)
Residential Advisor	242 (54.8%)	67 (15.2%)	81 (18.3%)	52 (11.8%)
Advisor	159 (36.0%)	69 (15.6%)	103 (23.3%)	111 25.1%)
Faculty	5 (1.1%)	44 (10.0%)	107 (24.2%)	286 (64.7%)
Other Students	122 (27.6%)	108 (24.4%)	130 29.4%)	82 (18.6%)
Dean or Other Administrator	120 (27.1%)	81 (18.3%)	104 (23.5%)	137 (31.0%)
Course Syllabus	2 (0.5%)	21 (4.8%)	87 (19.7%)	332 (75.1%)

Subscale Scoring Range: 13-40 Mean: 28.06 Median: 28.00 SD: 6.431 $n = 442$

Program Improvement Suggestions-Item Descriptive Statistics

Please indicate how successful the following strategies would be at improving academic integrity in your nursing program:	**Unlikely**	**Somewhat**	**Likely**
Implementing an honor code	83 (18.8%)	177 (40%)	182 (41.2%)
Better education regarding academic integrity at the beginning of the program	64 (14.5%)	137 (31%)	241 (54.5%)
Harsher sanctions for violations of academic integrity	74 (16.7%)	153 (34.6%)	215 (48.6%)
Use of plagiarism-detecting software, such as TurnItIn or SafeAssign	31 (7%)	128 (29%)	283 (64%)

Subscale Scoring Range: 4-12 Median: 10 Standard Deviation: 2.09 $n = 442$

Willingness to Report Peer Violations Subscale- Item Descriptive Statistics

How likely is it that:	**Very Unlikely**	**Unlikely**	**Likely**	**Very Likely**
You would report cheating that you observed during a test?	54 (12.2%)	165 (37.3)	149 (33.7%)	74 (16.7%)
You would report cheating that you observed during a classroom activity other than a test?	79 (17.9%)	224 (50.7%)	97 (21.9%)	42 (9.5%)
You would report cheating that you observed in the clinical setting that you think could cause patient harm?	19 (4.3%)	35 (7.9%)	103 (23.3%)	285 (64.5%)
You would report cheating that you observed in the clinical setting that you do not think could cause patient harm?	27 (6.1%)	109 (24.7%)	181 (41%)	125 (28.3%)
You would report cheating in the simulation setting?	60 (13.6%)	195 (44.1%)	129 (29.2%)	58 (13.1%)
You would report cheating in the laboratory setting?	58 (13.1%)	188 (42.5%)	132 (29.9%)	64 (14.5%)
You would report cheating on an online exam?	69 (15.6%)	163 (36.9%)	113 (25.6%)	97 (21.29%)
You would report cheating on an online assignment?	94 (21.3%)	192 (43.4%)	97 (21.9%)	59 (13.3%)
You would report cheating on a quiz if everyone seemed to be doing it?	89 (20.1%)	188 (42.5%)	99 (22.4%)	66 (14.9%)
You would report cheating on an assignment that was worth few points towards your total grade?	82 (18.6%)	198 (44.8%)	108 (24.4%)	54 (12.2%)

You would report cheating on an assignment that was worth many points towards your total grade?	58 (13.1%)	151 (34.2%)	145 (32.8%)	88 (19.9%)
The typical student in your nursing program would report such violations?	77 (17.4%)	192 (43.4%)	123 (27.8%)	50 (11.3%)
The typical student in your nursing program student would report a close friend for cheating?	167 (37.8%)	169 (38.2%)	74 (16.7%)	32 (7.2%)
You would report someone for cheating if you knew the person?	83 (18.8%)	179 (40.5%)	130 (29.4%)	50 (11.3%)
You would report someone for cheating if you did not know the person?	53 (12%)	156 (35.3%)	162 (36.7%)	71 (16.1%)
You would report someone for cheating if you lived with them?	110 (24.9%)	174 (39.4%)	108 (24.4%)	50 (11.3%)

Subscale Scoring Range: 16-64 Mean: 39.47 Median: 37 SD: 11.96 n = 442

Appendix H

Knowledge Assessment Item Analysis

Knowledge Assessment Item Analysis

Question Number	Question	Type of Question	*p*-value	PBI
1	You have taken an online quiz and have a question about the correct answer. When emailing your instructor, you attach a screen shot of the question. This is an academic integrity violation.	True/False	0.64	0.50
2	You submit a teaching presentation that you used last year for your current class with minor modifications. Given that this is your work, it is not a violation of academic integrity	True/False	0.68	0.52
3	Which statement is accurate when considering violations of academic integrity?	Multiple Choice	0.75	0.57
4	Which action is not a violation of academic integrity?	Multiple Choice	0.89	0.25
5	You are having difficulty getting an accurate count for your patient's respirations when completing your physical assessment during clinical. For each of the last 3 shifts the patient's respirations have ranged between 16-18. What is your best action?	Multiple Choice	0.95	0.11
6	Which statement best defines academic integrity?	Multiple Choice	0.86	0.29
7	When seeing a peer document on a patient, you are aware they did not complete the assessment as documented. Which statement is true?	Multiple Choice	0.91	0.26
8	Concerns about being accepted into highly competitive nursing programs are an acceptable reason nursing students engage in violations of academic integrity.	True/False	0.85	0.30
9	Many students commit academic integrity violations based on the presumption that faculty will not be able to prove they were cheating	True/False	0.72	0.39

10	Which method is a way in which faculty can best promote the academic integrity policies of the university?	Multiple Choice	0.75	0.32
11	A student is assigned to work with a registered nurse during a clinical rotation and the faculty will only check in on them during the clinical day. Which example would be considered a violation of academic integrity in the clinical setting? Select all that apply.	Multiple Response	0.31	0.83
12	Faculty can serve as role models through their behaviors in both the classroom and clinical settings. Which methods are ways that faculty can display this behavior? Select all that apply.	Multiple Response	0.40	0.55
13	An exam is being administered by a faculty member. Which behavior by the faculty member could increase the likelihood of a student cheating?	Multiple Choice	0.84	0.42
14	A faculty member and student are discussing academic integrity and where to find information related to academic integrity on the campus. The faculty member directs the student to which resources? Select all that apply.	Multiple Response	0.39	0.69
15	Reporting violations of academic integrity is only appropriate if the violation occurs during an examination	True/False	0.95	0.18
16	Several states require nurses to report potential harm done to patients by themselves or other nurses	True/False	0.98	0.08
17	In the clinical setting, you overhear a fellow nursing student say he is going to “make up” vital signs on his assigned patient as he doesn’t want to wake the patient. You are not sure whether or not to report the incident. Which of the following statements is true?	Multiple Choice	0.77	0.51
18	Nursing students are more likely to cheat if which of the following statements is true?	Multiple Choice	0.92	0.23

19	You are aware that a group of peers completed an assignment collaboratively when the instructions were to work individually. You were not involved in the group and aren't sure if you should report what you saw. Which statement is the most accurate?	Multiple Choice	0.91	0.19
20	Which is not a reason why students hesitate to report peer violations of academic integrity?	Multiple Choice	0.31	0.80
21	Whose responsibility is it to review academic integrity policies to ensure understanding?	Multiple Choice	0.75	0.35

Subscale Scoring Range: 5 - 21 Mean: 15.54 KR-20: 0.634 SD: 2.811 $n = 442$

Appendix I

Perceived Faculty Support of Academic Integrity Policies Subscale Correlations with Source Effectiveness

Perceived Faculty Support of Academic Integrity Policies Subscale Correlations with Source Effectiveness

Measure	1	2	3	4	5	6	7	8	9	10	11
1. Perceived Faculty Response Subscale	__	.367	.376	.265	.411	.342	.428	.393	.368	.448	.366
2. First-Year Orientation	.367	__	.360	.371	.293	.257	.283	.261	.202	.318	.247
3 Campus Website	.376	.360	__	.416	.418	.397	.367	.191	.316	.429	.256
4. Student Handbook	.265	.371	.416	__	.260	.136	.206	.283	.098 *	.341	.373
5. Program Counselor	.441	.293	.418	.260	__	.575	.670	.320	.402	.501	.262
6. Residential Advisor	.342	.257	.397	.163	.575	__	.661	.257	.406	.441	.164
7. Advisor	.428	.283	.367	.206	.670	.661	__	.359	.428	.549	.261
8. Faculty	.393	.261	.191	.283	.320	.257	.359	__	.320	.403	.424
9. Other Students	.368	.202	.316	.098 *	.402	.406	.428	.320	__	.379	.190
10. Dean /Other Administrator	.448	.318	.429	.341	.501	.441	.549	.403	.379	__	.304
11. Course Syllabus	.366	.247	.256	.373	.262	.164	.261	.424	.190	.304	__

Note. *. Correlation is significant at $p < .05$. $n = 442$.
All other correlations significant at $p < .01$. $n = 442$.

Appendix J

Perceived Faculty Support of Academic Integrity Policies and Source Effectiveness Coefficients Table and Collinearity Diagnostics Table

Perceived Faculty Support of Academic Integrity Policies and Source Effectiveness Coefficients Table

Coefficients[a]

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.	95.0% Confidence Interval for B		Correlations			Collinearity Statistics	
		B	Std. Error	Beta			Lower Bound	Upper Bound	Zero-order	Partial	Part	Tolerance	VIF
1	(Constant)	13.224	2.820		4.689	.000	7.682	18.767					
	first year orientation	1.353	.471	.127	2.871	.004	.427	2.280	.342	.137	.112	.773	1.293
	campus website	1.131	.472	.119	2.398	.017	.204	2.058	.379	.115	.094	.623	1.605
	student handbook	.196	.538	.017	.364	.716	-.862	1.253	.282	.018	.014	.665	1.504
	program counselor	1.119	.500	.127	2.239	.026	.137	2.101	.427	.107	.087	.477	2.098
	residental advisor	-.602	.502	-.066	-1.198	.231	-1.588	.385	.314	-.058	-.047	.498	2.010
	advisor	.780	.509	.095	1.532	.126	-.221	1.780	.411	.074	.060	.394	2.539
	faculty	1.293	.637	.094	2.029	.043	.041	2.545	.350	.097	.079	.709	1.411
	other students	1.150	.425	.125	2.707	.007	.315	1.986	.360	.129	.106	.709	1.411
	dean/other adminstrator	1.065	.429	.128	2.483	.013	.222	1.908	.432	.119	.097	.574	1.741
	course syllabus	2.230	.769	.131	2.901	.004	.719	3.742	.342	.138	.113	.752	1.331

a. Dependent Variable: Percieved Faculty Support of Academic Integrity PoliciesSubscale

Collinearity Diagnostics Table

Collinearity Diagnostics[a]

Model	Dimension	Eigenvalue	Condition Index	Variance Proportions										
				(Constant)	first year orientation	campus website	student handbook	program counselor	residental advisor	advisor	faculty	other students	dean/other adminstrator	course syllabus
1	1	10.154	1.000	.00	.00	.00	.00	.00	.00	.00	.00	.00	.00	.00
	2	.273	6.095	.01	.01	.00	.02	.02	.15	.06	.01	.00	.01	.01
	3	.120	9.186	.00	.01	.03	.02	.01	.02	.01	.00	.82	.01	.00
	4	.105	9.825	.00	.01	.00	.00	.01	.39	.01	.00	.00	.56	.00
	5	.095	10.339	.01	.00	.50	.00	.06	.04	.12	.02	.04	.02	.01
	6	.079	11.353	.00	.01	.13	.00	.45	.27	.01	.01	.01	.28	.00
	7	.056	13.430	.00	.00	.12	.00	.43	.11	.75	.00	.00	.07	.00
	8	.052	14.030	.01	.92	.02	.01	.00	.03	.01	.03	.01	.00	.02
	9	.034	17.205	.03	.02	.17	.92	.01	.00	.02	.06	.10	.01	.01
	10	.020	22.434	.15	.01	.02	.02	.00	.00	.00	.86	.00	.04	.17
	11	.012	29.644	.79	.01	.00	.01	.00	.00	.00	.00	.00	.01	.78

a. Dependent Variable: Percieved Faculty Support of Academic Integrity PoliciesSubscale